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## Experiences of High School Noncompleters With Emotional and Psychological Challenges

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# Walden University

College of Counselor Education & Supervision

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Christine M. Park

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The Office of the Provost

Walden University  
2019

Abstract

Experiences of High School Noncompleters With Emotional  
and Psychological Challenges

by

Christine M. Park

MA, University of Hawaii at Hilo, 2007

BEd, Gonzaga University, 2004

Dissertation Submitted in Partial Fulfillment  
of the Requirements for the Degree of  
Doctor of Philosophy  
Counselor Education and Supervision

Walden University

October 2019

## Abstract

High school noncompleters are those who did not earn a high school diploma. Before their early departure from high school, noncompleters often struggled with challenges (poverty, mental health, addiction, and emotional and physical abuse). Some enter remedial education to earn their equivalency credential. However, in this setting, they experience additional challenges, such as increased responsibility, stress, and anxiety. The problem surrounding the experiences of noncompleters has implications for counseling due to the limited use of and access to counseling as well as the disproportionate amount of mental health concerns and adversity among noncompleters. Current literature informs of the challenges noncompleters face, however more in-depth information on their experiences is still needed. The purpose of this hermeneutic phenomenological study was to address this gap and explore how adult remedial learners experience emotional and psychological challenges before dropping out and while enrolled in an equivalency program. Semi-structured interviews were conducted with 7 noncompleters ages 18-25 who were enrolled in adult remedial education classes in Hawaii, spoke English as their primary language, and self-reported experiencing emotional and psychological challenges. Data analysis through the hermeneutic circle yielded 11 themes: external adversity; interpersonal, emotional, psychological, and school struggles; maladaptive behaviors; high school equivalency is positive; external and internal protective factors; counseling is positive; and counseling limitations. From a social change perspective, results can be used to improve counseling services, reduce adversity, and improve outcomes for noncompleters.

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## Dedication

I dedicate my dissertation to my family. It is through your love, support, and sacrifices that I am able to achieve my goals. My accomplishments are yours. I also dedicate my dissertation to all students who departed from high school as a result of challenges, barriers, and struggles, and to the staff of adult education programs and counselors who work tirelessly to help marginalized individuals and disadvantaged communities overcome hardship and barriers.

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## Chapter 1: Introduction to the Study

### **Introduction**

Counselors are employed in a various types of settings, one of which is schools. In the school setting, counselors provide support to students to help them be successful in their academics as well in their personal lives. However, not all students are able to complete their academic programs. Although the majority of students will graduate from high school, there are those who do not make it through. Approximately 30% of students do not complete high school (Messacar & Oreopoulos, 2013). These individuals often struggle with challenges prior to dropping out and face even more challenges as they enter adulthood (O'Neill & Thomson, 2011). After students drop out, they encounter unique barriers yet frequently receive less support and attention than their peers who complete high school (Holmquist, Gable, & Billups, 2013). Although there is literature that provides a deeper understanding of the experiences of students in high school and postsecondary institutions, a review of the literature uncovered little research regarding adult remedial learners who did not complete high school. Counselors require more information in order to address and respond effectively to the unique needs of this population (O'Neill & Thomson, 2011). With this study, I sought to address this gap in the literature by addressing the needs of adult remedial learners and gaining rich information on their experiences. This chapter provides relevant background information for this study and presents the problem, purpose, research questions, theoretical framework, nature, definitions, assumptions, scope and delimitations, limitations, and significance of the study.

## Background

Although approximately 70% of students will earn a secondary (high school) diploma by graduating from high school, there are those that do not complete high school (Messacar & Oreopoulos, 2013). These individuals are referred to as *noncompleters* (Daley, Martin & Roessger, 2018; Greenberg et al., 2014). Approximately 30% of students drop out of high school before obtaining their diplomas (Khawwaja, Sum, & Palma, 2014; Lessard, Fortin, Marcotte, & Royer, 2009; Messacar & Oreopoulos, 2013). There are several reasons why some individuals do not complete high school. These reasons include being *pushed out* as a result of consequences for in-school behaviors and circumstances, being *pulled out* due to factors that require a student to withdraw from school, and *falling out* because a student is not able to keep up (Doll, Eslami, & Waters, 2013, p. 2). Regardless of their reason for dropping out, individuals without a high school diploma are more likely to face economic hardship and decreased career opportunity compared to their peers who graduate, and they are 2 times more likely to live in poverty (Kaffenberger & O'Rourke-Trigiana, 2013; Santiago, Katlman & Miranda, 2013). Individuals in poverty have increased risk for psychological concerns (Santiago et al., 2013).

Fortunately, there are programs in which high school noncompleters can earn high school equivalency (HSE) credentials. Such adult education programs include remedial offerings in English language acquisition (ELA), adult basic education (ABE), and adult secondary education (ASE). Students enrolled in these programs are *adult remedial learners*. According to the National Report System for Adult Education (NRS, 2015),



which is a project of the U.S. Department of Education (U.S. DOE), ABE programs serve students whose reading, writing, and math skills are at basic levels (equivalent to 9.0 grade level and below), whereas ASE programs serve students whose academic skills are at proficiency levels (equivalent to 9.0-12.9 grade level). These programs are designed to help individuals improve their literacy and numeracy skills so that they can take and pass equivalency exams and other competency-based programs in order to earn HSE credentials (NRS, 2015).

Unfortunately, when noncompleters decide to return to school, they often face many challenges (Holmquist et al., 2013). These challenges may make it difficult for these learners to complete HSE programs and attain academic achievement. Doll et al. (2013) shared that only about 50% of students who sign up for an HSE program actually earn a diploma. There are many factors that play a role in the success of adult remedial learners. Willans and Seary (2011) stated that many high school noncompleters had poor experiences with school. These experiences often result in personal and psychological barriers to attendance and academic achievement. These barriers include lower self-efficacy, poor learner identity, and increased stress, anxiety, and frustration (Allen & Bradley, 2015; Gluck, 2011; O'Neill & Thomson, 2011). In addition, high school noncompleters are more likely to have struggled with mental health concerns prior to dropping out (Fergusson, McLeod, & Horwood, 2015).

Learners who are able to overcome initial personal and psychological barriers in order to return to school may face additional challenges as they seek to reconcile their responsibilities as students with their responsibilities to their families and employers

(O'Neill & Thomson, 2013). Increased levels of responsibility and pressure may result in added emotional barriers and stress (Williams & Seary, 2011), which may then compound the difficulty of obtaining an HSE credential. Supports such as counseling can improve outcomes for these individuals (Brock, 2010). However, school counselors employed in academic settings often address academic needs rather than the emotional and psychological needs of learners, and they may not address the unique needs of nontraditional learners (Morris & Slaten, 2014). In addition, school counselors report needing additional training and information in order to adequately address the mental health needs of students (Carlson & Kees, 2013; Walley, Grothaus, & Craigen, 2009). In a review of school counseling conferences from 2010-2013, DeKruyf, Auger, and Trice-Black (2013) found that only about 15% of conference sessions were related to issues and topics surrounding mental health and counseling.

For this population, counseling support is limited due to the school setting, available resources, and lack of awareness of the needs of noncompleters in adult education (Meek, Specht, & Rodger, 2017). Brock (2010) shared that most institutions that serve the least prepared and most nontraditional learners do not offer adequate counseling supports. In general, although school counselors are trained to function as mental health counselors, they are not used in this capacity (Walley et al., 2009). Counselors are often called upon to help students manage school-related and other conflicting responsibilities, rather than to provide more general counseling (Collins, 2014; Dekruyf et al., 2013). As a result, lack of practice in counseling and continued counseling professional development make it challenging for school counselors to meet

the mental health needs of students (Walley et al., 2009). In addition, recent and past literature in education, counseling, and related fields has focused on primary, secondary, and postsecondary supports. Individuals who did not complete high school are not adequately represented in the literature, and while it is known that this population experiences increased challenges with mental health, physical health, and economic barriers, little is known about their emotional and psychological barriers or their experiences with counseling. Therefore, counselors do not fully understand the experiences of this population. More information is needed, particularly because individuals who drop out of high school are more likely to have experienced mental health issues, including trauma, abuse, and mental illness, which may have led to the decision to drop out (Fergusson et al., 2015). These concerns then follow them into adulthood. In other words, a return to school to obtain an HSE credential does not result in the elimination of preexisting challenges. When noncompleters return to school to get an HSE credential, they are likely to face additional stress, anxiety, and frustration as a result of being back in school (O'Neill & Thomson, 2012). Barriers and stressors experienced by learners in adult remedial settings who are seeking HSE credentials can result in increased mental health concerns (Petty & Thomas, 2014). Despite this vulnerability, high school noncompleters are less likely to access mental health care and counseling services than those who graduate from high school (Meek et al., 2017). Without adequate support, adult remedial learners face hardship and a decreased chance of success (O'Neill & Thomson, 2012). In order to better reach this population, counselors need a better understanding of their experiences with counseling as well as the

emotional and psychological barriers that these individuals face prior to and after dropping out.

### **Problem Statement**

Individuals who have not obtained a high school diploma through traditional means (i.e., graduating from high school) have increased health-related concerns, including behavioral and mental health challenges (Lee, Herrenkohl, Kosterman, Small, & Hawkins, 2013; Zajacova & Everett, 2014). Prior to dropping out, high school noncompleters are known to have higher rates of mental illness, economic hardship, and exposure to trauma, abuse, and substance use (Fergusson et al., 2015). These challenges are connected with high school dropout and are not eliminated with a return to school or earning of an equivalency credential. Rather, a return to school to obtain an HSE credential may result in above-average levels of anxiety, stress, and frustration (O'Neill & Thomson, 2013). For these individuals, past negative experiences with school; increased stress, anxiety, and frustration; and decreased self-esteem and poor self-concept as a result of dropping out make it difficult to succeed and compound the challenges they face (Allen & Bradley, 2015; Gluck, 2011; O'Neill & Thomson, 2011).

High school noncompleters could benefit from counseling support. Brock (2010) stated that most remedial learners need help with resolving personal issues and navigating their lives to attain academic and economic success. However, adult education systems have fewer mental health services and supports in comparison to traditional learning settings, such as primary, secondary, and postsecondary levels (Meek et al., 2017). If school counselors do not provide adequate counseling services, the only access that adult

remedial learners have to mental health care may be through community agencies or private means. However, adults without a HS diploma, particularly young or emerging adults, are less likely to access quality mental health care as a result of the lack of health insurance or access to counseling services (Lee et al., 2013). In other words, barriers such as lack of access to services make it difficult for these individuals to receive adequate mental health care.

Currently, counseling professionals are not reaching the population of adult remedial learners effectively. School counseling services for this population are limited due to the nature of the setting, a high student-to-counselor ratio, gaps in training for school counselors, and the many other responsibilities that counselors have (Bettinger, Boatman, & Long, 2013; DeKruyf et al., 2013; Mangan, 2015; Owens, Pernice-Duca, & Thomas, 2009). In addition, adult remedial learners may not seek private care due to challenges with access and health insurance (Lee et al., 2013; Morris & Slaten, 2014). In comparison to traditional learning settings, programs that serve adult remedial learners tend to offer far less information, supports, and services to help these learners address their mental health needs (Meek et al., 2017). A lack of understanding and awareness of the experiences of these individuals makes it difficult for counseling professionals to provide adequate counseling and outreach services to them. This population is not one whose members typically reach out for or receive mental health services, so a better understanding of their experiences is important for providing adequate services as well as understanding what can be done to help these individuals seek out and use counseling services. Overall, this is a population whose members face unique challenges and are not

receiving adequate counseling. Before counseling supports for these learners can be implemented and improved, however, more information is needed to understand the experiences of adults in remedial education. This information and understanding are important to building better counseling services for these individuals, calling attention to their unique needs, and improving outreach efforts.

### **Purpose**

Adequate services are needed in adult remedial education settings to address the emotional and psychological needs of remedial adult learners (Reinke, Stormont, Herman, Puri, & Goel, 2011). This qualitative study explored the lived experiences of adult remedial learners. The purpose of this hermeneutic phenomenological study was to explore how adult remedial learners experience emotional and psychological challenges prior to dropping out and through enrollment in an equivalency program. This study may provide counselors with rich, in-depth information regarding the emotional and psychological experiences of adult remedial learners regarding counseling, what barriers they experience, and how they overcome such barriers. Data gathered regarding the experiences of adult remedial learners may be used to inform counseling services for these individuals.

### **Research Questions**

#### **Primary Question**

How do adult remedial learners experience emotional and psychological challenges prior to drop out and through enrollment in an equivalency program?

### **Subquestions**

1. What are the experiences of adult remedial learners with counseling, if any?
2. How do adult remedial learners experience barriers to success, if any?
3. How do adult remedial learners overcome such barriers to success, if any?

### **Conceptual Framework**

This qualitative study used a hermeneutic phenomenological framework.

Hermeneutics, a phenomenological approach, is a theoretical framework for interpreting and making meaning of experiences and perspectives (Creswell, 2013; Patton, 2015).

The philosophy was first conceived by Frederick Schleiermacher in the early 1800s (Patton, 2015; Schleiermacher, 1990). Heidegger branched off of phenomenology and developed hermeneutic phenomenology (van Manen, 2007). He viewed phenomenology as a way to uncover the true essence of the human experience with the actions of human experience (van Manen, 2007). It was seen as a bridge between being and acting (van Manen, 2007). Researchers using hermeneutic phenomenology focus on the lived experiences of participants and work to identify key themes and interpretations of the experiences of participants (Gibbs, 2010; Maxwell, 2013; Pascal, 2010; Patton, 2015).

Unlike transcendental phenomenology, hermeneutic phenomenology does not use bracketing (Tavallaei & Talib, 2010). *Bracketing* refers to the systematic way in which researchers identify and make note of their personal views, beliefs, thoughts, and prior knowledge related to a study (Ravtich & Carl, 2016). Instead, from the hermeneutic framework, a researcher's interpretation is viewed as being present throughout the research process and cannot be bracketed out (Gadamer, 1989; Patton, 2015). Heidegger

contended that beliefs and ideas are preconceived and are part of human existence (Wrathall, 2006). He described this as *Dasein*, which refers to being in the world and being in one's existence (Heidegger, 1962). As a philosophy, hermeneutic phenomenology is centered around what understanding is and how it is arrived upon (Wrathall, 2006). True understanding is not about knowing facts and having information. Instead, true understanding is understanding existence and knowing how people live (Wrathall, 2006). What is essential may change over time and will change as understanding evolves. According to Gadamer (1989), all understanding comes from the self and is derived from preunderstanding, which is necessary for new understanding to develop. From this perspective, preunderstanding is part of understanding and influences new understanding whether the researcher is aware of it or not (Gadamer, 1989). Within a hermeneutical framework, new understanding is derived through the *hermeneutic circle*, which is a process of moving back and forth from small parts of data to the larger picture (Gadamer, 1989). The hermeneutic circle involves correcting one's bias, prejudices, and preconceived ideas, beliefs, and understanding (Boell & Cecez-Kecmanovic, 2014). As a researcher's experience is part of the research process, being aware of potential bias is important. The researcher's role includes examining preunderstanding and evolving understanding as new information is gathered and more in-depth meaning is made. The process includes looking at the whole and analyzing parts of the whole, with regular synthesis of parts and their relation to the whole. Overall, the goal of a study is not to describe; rather, it is to understand and explain the experience through interpretation and establishing meaning in context (Gadamer, 1989).



## **Nature of the Study**

### **Qualitative**

The study was qualitative in nature. Qualitative research was consistent with the goal of this study, which was to understand the lived experiences of adult remedial learners. This study explored the lived experience of adult remedial learners through a hermeneutic phenomenological qualitative approach using individual in-person and semistructured interviews. When conducting in-depth interviews, researchers use open-ended questions to obtain in-depth information from participants (Rubin & Rubin, 2012). This method aligns with a hermeneutic phenomenological framework that focuses on understanding the rich experience of participants (Kafle, 2011). This approach also remained consistent with the focus of this study, in which I aimed at uncovering the rich and in-depth experiences of participants while recognizing my role as the researcher in the research.

Hermeneutic phenomenology focuses on uncovering the essences and the true meaning of the lived experience, or life world (van Manen, 2007). One of the benefits of a hermeneutic phenomenology is that researchers can uncover rich and in-depth understanding without being confined by a particular structure or theory. This approach to qualitative research holds that the researcher is part of the process. The researcher takes an active role, and the researcher's understanding is embedded into the research process (Patton, 2015; Ravitch & Carl, 2016). As the researcher, my role was to establish rapport with participants, guide the interviews, and work to uncover the essence of participant experiences (Maxwell, 2013). My role as the researcher included being

transparent about how preunderstanding was used to develop new understanding. Bracketing is not used in hermeneutic research because preunderstanding is seen to influence new understanding (Gadamer, 1989). My preunderstanding and process in uncovering meaning through the hermeneutic circle yielded the final interpretation and results. Gadamer (1989) described the hermeneutic circle as an approach to understanding in which a researcher moves between and from parts to build a larger understanding of a phenomenon as a whole. Through the hermeneutic circle, researchers can arrive at new and deeper understanding (Boell & Cecez-Kecmanovic, 2010). The application of the hermeneutic circle begins with absorbing the essence of participant experiences through review of the whole interview (transcript) as well as parts of the interview. Through the coding process, I analyzed parts in relation to the whole. I then analyzed each interview as it related to the other interviews as a whole and in parts. The codes were synthesized and reviewed again with consideration of the whole data set (all the interviews). From this, themes and patterns were uncovered and synthesized to develop new meaning.

### **Types and Sources of Data**

Data were collected using semistructured interviews with a representative group of seven adults aged 18-25 years who did not complete high school and were in remedial education classes to earn an HSE credential. Follow-up member-checking interviews were conducted for clarification and to obtain any missing data. Interviews were hand transcribed verbatim and coded. Memos and journals were also kept throughout the research process and were used to keep a record of interviews and for reflexivity.

## **Definitions**

### **Adult Remedial Education**

According to the Adult Education and Family Literacy Act (AEFLA), *adult education* refers to services for individuals 16 years of age and older who are not enrolled in compulsory education, do not have a secondary credential (high school diploma), and function below postsecondary levels (U.S. Department of Education, Office of Career, Technical, and Adult Education [U.S. DOE OCTAE], 2015). *Adult remedial education* refers to educational programs and settings that offer adult basic education (ABE) and adult secondary education (ASE) learning opportunities. These learning opportunities address the literacy and numeracy needs of adults who did not obtain a high school diploma and are working to obtain an HSE credential or employment (Holmquist & Gable, 2016; U.S. DOE, 2016; U.S. DOE OCTAE, 2015). Remedial education also occurs at the postsecondary level in settings such as developmental education courses in college. This study focused on adult remedial education for HSE.

### **Noncompleter**

A *high school noncompleter* is an individual who did not complete high school through traditional means (i.e., graduating from high school). This study uses the term *noncompleter* to refer to those who do not complete high school. This term has been used in other literature. For example, Daley et al. (2018) and Greenberg et al. (2014) used the term to refer to individuals who did not complete high school.

### **Adult Remedial Learners**

In this study, *adult remedial learners* refers to noncompleters who are enrolled in

remedial education settings in order to obtain an HSE credential. Where *noncompleters* are those who did not complete high school, *adult remedial learners* are those noncompleters who are enrolled in programs to obtain an HSE credential.

### **High School Equivalency**

An HSE credential is defined as equivalent to a high school diploma. It is a state-issued certificate of HSE and can be obtained by passing state-approved equivalency exams such as the General Educational Development (GED) tests for High School Equivalency Test (HiSET; U.S. DOE, 2016).

### **Literacy and Numeracy**

In this study, *literacy* refers to the level of knowledge an individual has in reading. In adult education, literacy functioning levels can be determined with an approved exam, such as the Test for Adult Basic Education (TABE) or the Comprehensive Adult Student Assessment Systems (CASAS) assessments (U.S. DOE OCTAE, 2015). *Numeracy* refers to the level of knowledge that an individual has in mathematics. In adult education, numeracy functioning levels can be determined by an approved exam, such as the TABE or the CASAS (U.S. DOE OCTAE, 2015).

### **Counseling**

Counseling professionals provide counseling services. Professional counselors work with clients to identify goals and solutions to overcome barriers and challenges (American Counseling Association, 2018). *School counseling* is defined as counseling services that are provided in educational settings (American School Counselor Association [ASCA], 2012, 2016). School counselors are counseling professionals who

provide services in academic settings and are trained to provide such (ASCA, 2012, 2016).

### **Emotional and Psychological Challenges**

In this study, *emotional and psychological challenges* refer to emotions, attitudes, and thoughts that may prevent an individual from attaining success and achievement. Emotional and psychological challenges are defined as prevailing barriers that may impede success. Examples of these challenges include, but are not limited to, anxiety, stress, frustration, negative self-perception, and other difficult feelings and thoughts that may have an influence on performance and functioning. Anxiety and depression have a negative impact and can lead to poor performance, which can lead to decreased self-esteem and concepts of self-worth (Hartley, 2010, 2011; Richardson, Abraham, & Bond, 2012). Jury et al. (2017) described *psychological challenges* as emotional experiences and challenges related to negative views of self, disconnectedness, and motivation.

### **Assumptions, Scope and Delimitations**

#### **Assumptions**

This study involved two main assumptions. First, I assumed that participants were honest in their answers and provided truthful responses to the questions. Another assumption was that participants had experiences to share during interviews, fully understood the interview questions, and were able to respond accurately.

#### **Scope and Delimitation**

Although information regarding the experiences of individuals in high school and college is available, there is limited information regarding the lived experiences of

individuals who did not complete high school and are in equivalency programs. In addition, there is limited information regarding the experiences of high school noncompleters regarding counseling and emotional and psychological challenges and barriers. In this study, I explored lived experiences of counseling and emotional and psychological challenges among adult remedial adult learners. Therefore, the scope of this study included adults who had not earned a high school diploma, were enrolled in an HSE program, had experienced emotional and psychological challenges, and could share their perspectives and experiences with or without counseling.

Adults with a high school diploma were not included in this study because they did not fit the purpose of the study. In addition, participants who had not experienced emotional or psychological challenges were not included in this study. Individuals in English language courses such as ELA were also not included in this study. The focus of this study was on individuals who did not complete high school and were enrolled in courses in order to obtain an equivalency credential rather than to gain English language skills. Therefore, individuals in this population might have experienced unique barriers as a result of language acquisition, which were not the primary focus of this study.

This study focused on rural areas of the island of Oahu. This region was selected because interviews took place in person and onsite. Historically, high school noncompleters have had negative experiences with institutions and adults (Hynes, 2014); thus, rapport was essential to uncovering true in-depth experiences. In-person interviews are beneficial for building rapport with participants (Ravitch & Carl, 2016). In addition, members of the population targeted in this study experience economic hardship, have

lower socioeconomic status (Dockery, 2012), and may not have access to the technology required for distance interviews (conducted online or by telephone).

Quantitative methods were not used for this study because the emphasis was on gaining understanding of the lived experiences of participants. Other qualitative approaches, such as case studies and observations, were not used to collect data because the emphasis was on the rich perspectives of participants regarding their experiences.

### **Boundaries of the Study**

The inclusion criteria for this study encompassed adults in remedial education HSE courses who spoke English as their primary language. Participants aged 18-25 years were selected for this study. According to Maynard et al., (2015), individuals in this age group are transitioning into adulthood. This age group was selected because there is limited information pertaining to the educational transition for these individuals (Maynard et al., 2015), and they are less likely to access mental health services than other age groups (Lee et al., 2013).

### **Transferability**

Where qualitative research is concerned, generalizability is not typically the intended outcome. Transferability, on the other hand, may be achieved (Bloomberg & Volpe, 2016; Connelly, 2016). *Transferability* refers to the extent that findings may be applicable to other settings and populations (Bloomberg & Volpe, 2016; Connelly, 2016; Cope, 2014). Although the information gained from this study may be useful in understanding adult remedial learners in an HSE program, the transferability is moderate. I recruited participants in adult remedial HSE programs in the State of Hawaii, and the

results may reflect the experiences of this population, which is unique in regard to cultural, ethnic, and demographic considerations. However, the information gained from this study may be used to add to the larger conversation regarding counseling services for adult remedial learners in HSE programs. Findings may transfer to other adult remedial populations and HSE settings. Crowe, Inder, and Porter (2015) asserted that readers are in part responsible for determining how the findings of a study could transfer to their context and setting. I aimed toward providing rich and detailed information regarding the study's context and the participants' experiences. Efforts to improve transferability were carried out through transparency and detailed descriptions regarding the research process and analysis.

### **Limitations**

There are several limitations of this study. The sampled population was only a small snapshot of a larger population. As mentioned above, transferability is a limitation of this study, and the uniqueness of the population in terms of culture and geographic region may make the transferability of this study even lower. Transferability, however, is not generally the intended outcome of qualitative research, and the purpose of this study was to gain a better understanding of the rich experiences of participants. This information may contribute to the larger conversation regarding adults in remedial education settings who are working on earning their HSE credentials, particularly in relation to the emotional and psychological experiences that these individuals have and their experiences with counseling and barriers.

In order to prevent bias, I kept regular journals and consulted with my dissertation



committee. Journaling was used to reflect on biases and to keep a record of the data collection and analysis process. For example, journal entries included reflections on thoughts following interviews and throughout the coding process. In addition, member-checking follow-up interviews were used. This method can be used to help improve the validity of a study and ensure that research bias did not have an influence on a study (Birt, Scott, Cavers, Campbell, & Walter, 2016; Grosseohme, 2014; Kornbluh, 2015).

### **Significance**

Ethnic minorities are overrepresented among high school noncompleters. Where non-Hispanic Whites have a noncompletion rate of 4.5%, Native Hawaiian Pacific Islanders have a noncompletion rate of 8.8%, Hispanics have a noncompletion rate of 12.4%, and Blacks have a noncompletion rate of 7.9% (Stark & Noel, 2015). Without a high school diploma, noncompleters are 2 times more likely to live in poverty than their peers who graduate from high school, and they are more likely to struggle with mental health problems (Kaffenberger & O'Rourke-Trigiana, 2013; Maynard et al., 2015; Santiago et al., 2013). Approximately 36% of individuals without a high school diploma live in poverty (Khatiwada et al., 2014; Lessard et al., 2009). These individuals are at a disadvantage and often find themselves stuck with limited opportunities and in lower paying jobs with less chance for promotion (Maynard et al., 2015). Economic disparities are linked with poor health, mental illness, and substance use (Fergusson et al., 2015; Maynard et al., 2015; Vaughn, Beaver, Wexler, DeLisi, & Roberts, 2011).

Obtaining HSE credentials can open doors for adult learners and can lead to improved career opportunities, financial stability, attitudes toward school, and self-

esteem (Maynard et al., 2015; O'Neill & Thomson, 2013; Willians & Seary, 2011).

However, returning to school is not an easy task. Individuals who do return to obtain their equivalency diplomas often face many challenges. High school noncompleters often have personal and psychological barriers, such as negative experiences with school, lower self-efficacy and learner identity, and increased stress, anxiety, and frustration, that deter them from attendance and academic achievement (Allen & Bradley, 2015; Gluck, 2011; O'Neill & Thomson, 2011). Counseling support can help high school noncompleters to attain higher levels of academic achievement as well as better career opportunities, higher self-esteem, greater financial stability, and better attitudes toward school (Coogan & DeLucia-Waack, 2007; O'Neill & Thomson, 2013; Willians & Seary, 2011). However, limited research is available regarding the unique needs and experiences of adult remedial learners with counseling services, and little has been done to address the emotional and psychological needs of these learners (O'Neill & Thomson, 2013).

A better understanding of the experiences of these learners is needed for the development of improved services and support systems (Coogan & DeLucia-Waack, 2007; Maynard et al., 2015; O'Neill & Thomson, 2013; Vaughn, Salas-Wright, & Maynard, 2014). This study generated an improved understanding of the emotional and psychological experiences of these learners, and the findings can be used to advocate for the needs of this disadvantaged population and to consider how counselors can reach members of this population, as well as the role that counselors can play in helping to improve their well-being and opportunities for success. With additional information

about the experiences of adult remedial learners, counselors may be better informed about the emotional and psychological experiences of adult remedial learners and their experiences regarding success and barriers. This information could inform efforts to improve student supports, promote academic persistence and achievement, and improve overall outreach and counseling services.

### **Summary**

To understand the problem and purpose of this study, it is important to have background information on the study topic, the study population, and the relevance to the counseling profession. In this chapter, I provided descriptions of these elements of the study and explained the theoretical foundation, research questions, nature, operational definitions, assumptions, scope and delimitations, limitations, and significance of the study. In the following chapters, more in-depth and detailed information is provided in the literature review (Chapter 2), research design and methodology (Chapter 3), results (Chapter 4), and discussion, conclusion, and recommendations (Chapter 5).

## Chapter 2: Literature Review

### Introduction

Counselors serve a variety of populations and work in a variety of settings, including students, schools, and other learning environments. In high schools, the school counselor's role is to help students achieve academic success (ASCA, 2012). However, despite dropout prevention efforts, not all students graduate and receive their high school diploma or certificate (Rumberger, 2012). There are many reasons that an individual might not complete high school, and there are many barriers that high school noncompleters face prior to and after dropping out (O'Neill & Thomson, 2011). These barriers include high levels of stress and anxiety associated with school and life responsibilities, economic hardship and poverty, and poor physical and mental health (Kaffenberger & O'Rourke-Trigiana, 2013; Lee et al., 2013; Zajacova & Everett, 2014). In addition, prior (and continued) lack of success and past negative experiences with school are barriers for noncompleters (Santiago et al., 2012). These barriers and challenges often continue into adulthood. Although adult education offers opportunities for students to obtain HSE credentials and participate in remedial education, barriers and challenges persist. In adult education settings, counseling services are not as readily available and, when present, they often do not support the unique needs of adult learners who did not complete high school (Lee et al., 2013; Morris & Slaten, 2014). In comparison to traditional learning settings, adult learning settings have far less information, supports, and services to address the mental health needs of adult remedial learners (Meek et al., 2017). Counseling professionals, moreover, have limited

understanding and awareness of the experiences of these individuals, making it difficult to provide adequate counseling and outreach services. There is a need for more information and understanding regarding this population, its members' needs, how counseling services can better support these individuals, and what efforts need to be made to improve opportunities for them. The purpose of this hermeneutic phenomenological study was to explore how adult remedial learners experience emotional and psychological challenges prior to dropping out and through enrollment in an equivalency program.

In preparation for this study, an extensive review of the literature was conducted in order to grasp historical as well as current concepts related to adult remedial learners' emotional and psychological experiences and counseling services for this population. The literature review provided information regarding some of the key concepts regarding high school dropout, barriers that individuals who drop out face, and counseling services surrounding high school dropout. I also examined literature related to the conceptual framework for this study. Although some information was available on emotional and psychological experiences prior to drop out, there was limited information regarding such experiences through enrollment in an HSE program (remedial education). In addition, there was limited research regarding the experiences of adult remedial learners with counseling.

This chapter provides a description of the literature review process, including search strategies; a description of hermeneutic phenomenology as a conceptual framework; and a comprehensive review of literature pertaining to adult education, adult remedial learners, high school dropout, barriers and challenges experienced by high

school noncompleters, and counseling for noncompleters and adult remedial learners.

### **Literature Search Strategies**

The literature review strategy included conducting literature searches of electronic databases such as EBSCOhost, PsycARTICLES, PsycINFO, SOCIndex, ERIC, Academic Search Complete, SAGE Publications, Google Scholar, and ProQuest. Information was also obtained from the U.S. DOE OCTAE. Combinations of the following key search terms were used to collect relevant articles: *adult learners, adult education, remedial education, adult remedial learners, remediation, developmental education, high school dropout, counseling, academic persistence, academic self-efficacy, low-skilled adults, nonparticipation, emotional health, well-being, college counseling, career counseling, academic motivation, adult literacy, education, poverty, mental health, self-esteem, GED, nontraditional learners, and school counseling*. The reference lists of relevant articles and dissertations were also used to identify additional peer-reviewed sources.

The primary criteria that I applied in my search for journal articles were that they needed to be peer reviewed, published within the last 5 years, and specifically related to the counseling profession. However, using these criteria, I found little information specifically pertaining to noncompleters in adult remedial education. To ensure a comprehensive review of the literature, I expanded my search criteria to include older materials, and I conducted a comprehensive search across disciplines. Sources that had been published within the last 5 years were preferred; however, the literature review encompassed articles published up to 10 years ago to get a fully comprehensive

foundation and historical context related to the topic. The review of the literature was expanded and was conducted across fields (counseling, education, psychology, social work, health, social justice, and workforce) in order to enable a better understanding of the literature that was available and research surrounding the experiences of adult remedial learners and high school noncompletion. Governmental reports, such as Census reports, longitudinal summary reports, and reports published by the U.S. DOE and other government offices and departments, were also included in this literature review. These reports provided statistical data as well as information on national trends.

### **Conceptual Framework**

#### **Phenomenology**

Methodology is the overall approach that is used to answer research questions in a study (Jones, Rodger, Ziviani, & Boyd, 2012). Theory is used as the framework of a study and serves as the foundation for research (Grant & Osanloo, 2014; Green, 2013; Malterud, 2016). Phenomenology is both a philosophy and a research methodology. As a research methodology, it offers a theoretical and methodological framework that guides researchers in understanding human experiences (Bloomberg & Volpe, 2016; Jones et al., 2012; Kafle, 2011; Sloan & Bowe, 2014). As a theory, the philosophical perspective of phenomenology provides a way of understanding the world. This understanding of the world emerges from lived experience and reflects what it means to be in the world (Kafle, 2011; Sloan & Bowe, 2014). According to van Manen (2007), the focus is on the lived experience and understanding human existence.

Within phenomenology, there are various philosophies: transcendental,

existential, and hermeneutic (Cilesiz, 2010). Historically, phenomenology has a philosophical foundation in the work of Edmund Husserl (transcendental descriptive phenomenology) and Martin Heidegger (interpretive hermeneutic phenomenology; Bloomberg & Volpe, 2016; Converse, 2012; Kafle, 2011; Reiners, 2012). From the Heideggerian perspective, phenomenology is a way to uncover the true essence of the human experience with the actions of human experience (van Manen, 2007). It is seen as a bridge between being and acting (van Manen, 2007). Gadamer built on the work of Heidegger and placed emphasis on language and the process of making meaning through the hermeneutic circle (Sloan & Bowe, 2014). His focus was on the role that language has in uncovering what it means to be and to exist (Sloan & Bowe, 2014).

As a qualitative research methodology, phenomenology is a way to understand experiences through data collection, analysis, and reporting (Sloan & Bowe, 2014). Emphasis is placed on experiences and perceptions of the world and reflection on what it means to be in the world (Converse, 2012; Farina, 2014). The aim is not to develop or test theory; rather, the aim is to uncover new and deeper insight (Bloomberg & Volpe, 2016; van Manen, 2007).

### **Hermeneutic Phenomenology**

Hermeneutic phenomenology is an interpretive approach to phenomenology (Converse, 2012). It differs from Husserl's transcendental (descriptive) phenomenology in that those who use hermeneutic phenomenology attempt to interpret from within rather than describe from outside the experience (Sloan & Bowe, 2014; Yüksel & Yıldırım, 2015). Heidegger's perspective was that individuals are part of the world and cannot be



separated from it (Heidegger, 1962; Wrathall, 2006). He used the term *Dasein*, which translates to “being there” (Wrathall, 2006, p. 11). The term *Dasein* refers to a way of being and existence. Individuals do not have this sense of existence; rather, they are the state of existence (Wrathall, 2006). Heidegger’s view was that how one interprets the world determines how one exists in the world (Wrathall, 2006). The Heideggerian perspective holds that humans are a result of their experiences and how they interpret these experiences in a manner that creates meaning (Jones et al., 2012).

Researchers using a hermeneutic phenomenological framework focus on the lived experiences of participants and work to identify key themes and interpretations of these experiences (Gibbs, 2009; Maxwell, 2013; Pascal, 2010; Patton, 2015). This phenomenological approach is a conceptual framework for interpreting and making meaning of experiences and perspectives (Sloan & Bowe, 2014). The goal is to uncover the meaning of human existence through human experiences (Heidegger, 1962; Wrathall, 2006).

As a methodology, hermeneutics aims at uncovering the rich experiences of existence through interpretation of what it means to be in the world (Kafle, 2011). For individuals, meaning comes from how they interpret their experiences. The goal of a study is to uncover meaning by interpreting how participants experience the world. Interpretation comes from first acknowledging preunderstanding, which is seen to influence all new understanding (Gadamer, 1989). Unlike transcendental phenomenology, hermeneutic phenomenology does not use bracketing (Patton, 2015; Tavallaei & Talib, 2010). Bracketing refers to the systematic way in which researchers

identify and make note of their personal views, beliefs, thoughts, and prior knowledge related to a study (Creswell, 2013; Ravitch & Carl, 2016). According to Heidegger, beings are part of the world, and the world is what people find themselves in (Heidegger, 1962; Wrathall, 2006). Therefore, the philosophy of being in the world and not separate from the world is applicable to participants and researchers. Participants and researchers are not separated from research. The goal of the researcher is to uncover the rich experiences of participants without attempting to separate themselves from the world (the research).

### **Application of Hermeneutic Phenomenology**

As previously mentioned, researchers use hermeneutic phenomenology to uncover rich human experiences and interpret the meaning of these experiences to uncover new understanding (Kafle, 2011; Sloan & Bowe 2014). The goal is not to describe. Instead, the goal is to understand and explain the experience through interpretation and establishing meaning in context (Gadamer, 1989; Patton, 2015). Researchers are seen as part of the world and the experience; pure bracketing is not possible because their experiences and preunderstanding are present throughout the research process. From the hermeneutic perspective, all understanding comes from the self and is derived from preunderstanding, which is seen to influence new understanding, whether the researcher is aware of it or not (Gadamer, 1989). New understanding builds on preunderstanding, or *forestructure* (Tuohy, Cooney, Dowling, Myrphy, & Sixsmith, 2013). Meaning is arrived upon from preunderstanding, which is made sense of through reflection on the whole meaning and individual meaning units (Boell & Cecez-

Kecmanovic, 2010; Gadamer, 1989).

With phenomenology, the researcher explores the lived experiences of participants and investigates the essence of human experience while it is being experienced (Kafle, 2011; Yüksel & Yıldırım, 2015). Participants should all have some experience with the phenomenon of study and are typically selected because they may have particular insight and experience (Yüksel & Yıldırım, 2015). Typically, in comparison to studies conducted using quantitative designs, phenomenological studies involve a smaller number of participants, who are studied through extensive exploration and analysis (Bloomberg & Volpe, 2016). A hermeneutic phenomenological approach was appropriate for this study because it aligned with the research question and purpose, which aimed at uncovering the experiences of adult remedial learners. Phenomenology is particularly useful when there is limited literature on the study topic, as it can be used to explore the lived experience of a phenomenon in the absence of a thorough understanding and theory of the phenomenon as it relates to a population (Jones et al., 2014). The review of literature uncovered limited information on the lived experiences of adult remedial learners. The use of a hermeneutic phenomenological approach was beneficial to developing an in-depth understanding, particularly in the absence of literature. In addition, Hays and Singh (2012) shared that phenomenological research methods have been effective in gathering the experiences and perspectives of participants in counseling research. Phenomenology is also helpful as a means to better understand individuals in an education system (Kim, 2012). According to Kim (2012), phenomenology is a beneficial way to uncover the lived experiences of individuals who have not had much

success in schools. This research approach is valuable for its emphasis on understanding populations (Kim, 2012).

**Hermeneutic circle.** The hermeneutic circle is an approach to understanding. It is a spiral process of moving back and forth from parts to a larger whole as a new understanding is established (Boell & Cecez-Kecmanovic, 2010; Gadamer, 1989; Rennie, 2012; Sloan & Bowe, 2014). From the spiral process of the hermeneutic circle, understanding evolves as new meaning units are analyzed, added, and synthesized into the whole understanding. New understanding is constantly evolving as sense is made of the parts and the whole, with each part considered in relation to the others.

The hermeneutic circle was used in this study to examine, analyze, and interpret participant experiences to uncover their rich essence. After interviews were conducted and transcribed, the first step in the hermeneutic circle was to review the transcription text to generate preliminary meaning based on words and phrases from participant experience. From there, follow-up interviews took place, and secondary meaning was made from the interview transcripts. Final meaning was established through the synthesis of the data, which was generated from preliminary and secondary meaning units. This demonstrates the spiral process of the hermeneutic circle, which moves from parts (preliminary meaning units) to larger parts (secondary meaning units), to the whole (final meaning through synthesis). This process is one that is neither linear nor circular with no end and no new meaning (Gadamer, 1989). Rather, it is a continuous and spiral process that moves back and forth from parts to the whole; the parts help to make sense of the whole, and the whole helps to make sense of the parts (Gadamer, 1989; Rennie,

2012). In other words, throughout the analysis process, new meaning is derived from both the parts and the whole. Understanding of the whole aids understanding of the parts, and understanding of the parts uncovers new meaning for the whole (Rennie, 2012; Sloan & Bowe, 2014). Final meaning units were arrived upon through the synthesis of meaning and when no new meaning was uncovered. The in-depth and rigorous nature of hermeneutic phenomenology was beneficial and appropriate for this study, particularly because there is limited literature currently available on the research topic. To build a better understanding of how adult remedial learners experience emotional and psychological challenges prior to dropout and through enrollment in an equivalency program, in-depth understanding is needed.

### **Literature Related to Key Terms and Concepts**

In my review of the literature, limited information was found regarding adult remedial learners. In general, adult remedial learners have not been widely researched and discussed in the literature. Miller, McCardle, and Hernandez (2010) and O'Neill and Thomson (2013) identified a gap in research on adult remedial education in comparison with education in other more traditional settings (high school and college). Much of the literature reviewed focused on traditional-aged students, college students, and high school students. As a result of the lack of literature specific to high school noncompleters, my review of the literature included high school noncompletion, academic settings before and after dropout, barriers that high school noncompleters face, and the role of counseling and supports for noncompleters.

### **Justification for the Selection of Concepts**

This literature review evaluated literature relevant to terms and concepts related to this study's purpose, problem, and research questions. I began by reviewing the literature surrounding academic performance, high school drop out, experiences of adolescents at-risk for drop out, and counseling services for these individuals. The term *noncompleter* was used by Daley et al., (2018) and Greenberg et al. (2014) and refers to individuals that did not graduate from high school. This term was used rather than to call them "dropouts." Hynes (2014) referred to high school noncompleters as non-graduates who left school prior to earning their credential. My review of the literature also extended into adult education and remedial education. Adult remedial education describes educational settings for individuals who are receiving remedial education services. The term adult remedial education is consistent with the language used to describe high school equivalency and adult basic education programs that provide remediation to adult learners. It is worth mentioning that remedial education for college students also exists. Individuals in college remedial courses may have earned a high school diploma and be in remedial, or developmental, education courses (Bettinger et al., 2013). These students are in developmental education courses.

In this study, adult remedial education is the term used to define adult education programs for individuals who did not complete high school, and noncompleters in these programs are adult remedial learners. Adult remedial education is a relevant concept because it is the setting in which high school noncompleters enter to gain skills necessary to obtain a secondary equivalency credential and the setting in which this study took

place. In exploring adult remedial education, I searched for literature relevant to the experiences of individuals in these settings, particularly regarding barriers and experiences with counseling. The focus on these concepts is consistent with the purpose of this study and the research questions.

Overall, in my review of the literature, several key concepts related to the proposed research reoccurred. I organized these concepts into major categories, a) high school noncompletion, b) barriers for noncompleters and adult remedial learners, c) adult remedial education, and d) counseling support for adult remedial learners. The category of barriers is discussed as separate concepts: economic, health, and mental health. The follow sections will discuss the literature related to the concepts mentioned above.

### **High School Noncompletion**

Individuals in school face a variety of challenges. Carlson and Kees (2013) shared that common students concerns are related to postsecondary transition, relationships, stress, substance addiction, gender and sexuality, poverty, grief and loss, immigration, and family disruptions. These concerns can be barriers preventing student success. According to Hynes (2014), one-fifth of ninth graders will not graduate on time if they graduate at all. In addition, Carr and Galassi (2012) report that only about 70% of students earn their high school diploma on time. These drop out rates have been consistent in the United States for several decades. Messacar and Oreopoulos (2013) shared that drop out rates have been a consistent problem over the last 30 years, with approximately 30% of students dropping out. Individuals who do not complete high school have increased risk for health concerns, poverty, and engagement in criminality

often resulting in incarceration (Rumberger, 2012).

The review of the literature also explored contributing reasons for noncompletion. Doll et al. (2013) identified that there are several reasons that individuals drop out of high school. Students will “*fall out*” (they fall behind), are “*pulled out*” (for external reasons), or are “*pushed out*” (usually for disciplinary reasons; Doll et al., 2013, p. 2). Hynes (2014) also shared that many young adults leave school to take care of their families and others get involved in unhealthy relationships, such as gangs or other maladaptive relationships that pull them away from school. In addition, violence in the home was found to influence decisions to drop out because noncompleters reportedly felt compelled to stay home to protect their family from the abuser and they often did not want to attend school in fear that others would find out about the abuse (Hynes, 2014).

Fergusson, McLeod, and Horwood (2015) and Hynes (2014) shared that prior to dropping out, high school noncompleters experience mental illness, economic hardship, and exposure to trauma, unsafe environments (home, community, and school), abuse, and substance use. High school noncompleters often had to navigate through toxic environments at home and in school with many being exposed to violence and unsafe environments as well as unsupportive home lives and health problems (Hynes, 2014). Hynes (2014) shared that many high school noncompleters felt that adults did not care or listen to their concerns and that policies in place prevented them from being engaged in school. In addition, high school noncompleters may also have physical, mental, and learning disabilities in addition to other barriers and needs (Patterson, 2014).

These experiences take a toll on student wellness and mental health making it



difficult for students to remain in school and reach academic achievement. Hynes (2014) reported that 30% of surveyed students who experienced interrupted enrollment experienced abuse, 22% experienced homelessness, and 18% were involved in the juvenile justice system. Students with emotional difficulties have higher rates of noncompletion, and mental health concerns increase the risks of drop out (Hjorth et al., 2016; Miller & Rainey, 2008). Among dropouts, Hjorth et al. (2016) reported that 32% reported poor mental health. One-sixth of youth have mental health concerns such as depression, anxiety, substance abuse, and self-injury (Sink, 2011).

The review of the literature also uncovered other findings related to trends among noncompleters. Noncompleters are also most likely to be male and of lower economic status (Maynard, 2015; Stark & Noel, 2015). Hjorth et al. (2016) shared that females with anxiety and depression have an increased risk of noncompletion in comparison to females without such challenges. However, females are more likely to seek counseling and access support (Hjorth et al., 2106). On the other hand, males are less likely to seek counseling, thus there is stronger connection between mental health and noncompletion among gender differences (Hjorth et al., 2016). Miller et al. (2010) and Stark and Noel (2015) also shared that ethnic minorities, particularly Black and Hispanic students, are overrepresented in remedial education. Hjorth et al. (2016) also shared that socioeconomic status affects drop out and individuals in lower SES have increased risk of noncompletion.

In summary, individuals who do not complete high school do so for a variety of reasons, as identified above. Some of the prevailing trends include experiencing barriers,

such as lower economic status, mental health concerns, past and current exposure to traumatic and difficult events, and other life factors which pull individuals away from school. The above section provided a context for high school noncompletion. While this information sheds light on some of the experiences high school noncompleters have, there was limited information regarding what these experiences mean to these individuals and how they make sense of these experiences. The next section will explore concepts related to after noncompletion.

### **Adult Remedial Education**

On the academic front, individuals who did not complete high school can participate in adult education learning opportunities. Meek, Specht, and Rodger (2017) defined adult education as secondary level learning for adults who desire to earn their HSE credential. Additionally, Patterson (2014) shared that adult education programs prepare students for transition and are tasked with helping students face barriers upon completion of adult education programs. A review of the United States Department of Education (USDOE 2015) programs under the Adult Education and Family Literacy Act (AEFLA) revealed that individuals who have literacy levels of 9.0 grade and below may participate in Adult Basic Education (ABE), and students who have proficiency levels of 9.0-12.9 may participate in Adult Secondary Education (ASE). AEFLA is designed to help individuals 16 years of age and older develop knowledge and skills which are necessary for employment, self-sufficiency, and contributing to society (Miller et al., 2010). Both ABE and ASE offer remedial learning opportunities for individuals who did not earn a high school diploma and are in need of basic literacy and numeracy skills

(USDOE, 2015). ASE and ABE settings provide remedial learning opportunities for adult learners who are assessed to need basic literacy and numeracy skills and have not earned a secondary diploma, such as a high-school diploma or equivalent (GED and HiSET). Equivalency credentials open the doors to education and career opportunities for noncompleters (Garvey & Globe, 2011).

Individuals in these adult education programs are remedial adult learners. Porras-Hernandez & Salnas-Amescua (2012) shared that adult education is a means to improve social equality, employment, and workforce, and pave a path for individuals to improve skills. However, even with the presence of these programs, more needs to be done to promote success for students in remedial education (Brock, 2010). Adult remedial education should include support services (Koch, Slate, & Moore, 2012). For example, finding academic success can help to minimize the presence of barriers. Miller et al. (2010) shared that addressing low literacy among adult remedial learners can improve economic and health outcomes.

This section offered a synopsis of the literature surrounding adult remedial education. Overall, adult remedial education provides opportunity for high school noncompleters to gain skills and improve their quality of life (Meek et al., 2017; Porras-Hernandez & Salnas-Amescua, 2012; Van Velsor, 2009), but there are still gaps in the services provided and the information available regarding noncompleters. The next section will describe the literature surrounding adult remedial learners and some of the gaps and barriers related to noncompleters and adult remedial education.

### **Adult Remedial Learners**

Youth that drop out of school eventually become adults. With becoming an adult comes adult responsibilities. In general, adult learners have adult responsibilities that can be difficult and challenging to balance with the addition of school roles and life responsibilities, such as work and family (Jameson & Fusco, 2014; Ross-Gordon, 2011). Hynes (2014) shared that while many high school noncompleters may bounce back to overcome barriers, many do not successfully reengage with school as adults. Those that do bounce back often face barriers that traditional-aged students do not face (Jameson & Fusco, 2014; Meek et al., 2017; Ross-Gordon, 2011). Some of the barriers include lack of awareness of resources, lack of confidence, negative self-perception, other responsibilities, economic challenges, and health-related issues (Jameson & Fusco, 2014; Meek et al., 2017; Ross-Gordon, 2011). Adult remedial learners also have poor self-efficacy, lack of skills, and negative past experiences which can deter academic success (O'Neill & Thomson, 2013; Petty & Thomas, 2014).

### **Postsecondary Remedial Education**

While there is little information regarding the understanding of adult remedial learners' experiences and how they perceive their developmental progress (Koch et al., 2012), the literature has alluded to their experiences when entering college. The review of the literature included adults in remedial (or developmental) classes at the postsecondary level. This information is pertinent because it offers insight and context into the experiences of remedial learners even if not in a high school equivalency setting. Mangan (2015) shared that remedial students in college often enter without a role model

or guidance and, due to the difficulty level of college, may question why they are there or feel that they are not capable. Holmquist, Gable, and Billups (2013) shared that adult learners who have experienced academic failure in the past may perceive themselves as incapable of academic success in the future. These individuals often need supports in order to be successful (Garvey, 2011). Students who enter college at the remedial level often drop out, and colleges that enroll the most non-traditional students with the most needs often offer fewer supports (Brock, 2010).

Individuals who do not complete high school become adults that have not completed high school. Individuals who return to school often enter as adult remedial, or developmental, learners. These individuals are faced with challenges as a result of the lack of necessary skills, adult responsibilities, and historical experiences with school. The review of the literature uncovered barriers of high school noncompleters and adults in postsecondary remedial education. This information can provide a context for the experience of noncompleters and the experience of adult remedial learners. However, there remains limited information on experiences with barriers among noncompleters in adult remedial education for high school equivalency. This study aims at addressing this gap in the literature. The next sections will look more closely at some of the barriers adult remedial learners experience.

### **Barriers**

When examining noncompletion, it is helpful to understand contributing factors. In an effort to understand contributing factors, the review of the literature uncovered barriers noncompleters face. However, much of the literature focused on high school-

aged students or college students. In the review of the literature, there was little that specifically discussed high school noncompleters in adult remedial education for a high school equivalency. Thus, the review of the literature included the experiences of noncompleters after drop out across a variety of settings (adult remedial education, college, and employment-or the lack of). There were several themes that were uncovered related to barriers surrounding noncompletion. The following paragraphs will discuss these settings and barriers.

### **Economic**

Dropping out often results in decreased opportunities such as employment stability (Dockery, 2012; Maynard et al., 2015; Vaughn et al., 2014). Noncompleters often face economic hardship and are typically lower socioeconomic status (Dockery, 2012; Fergusson et al., 2015). Hjorth et al. (2016) shared that one in five students have higher risk of experiencing poverty, unemployment, and health concerns. Lower socioeconomic status is linked with major mental illness and comorbid substance abuse (Fergusson et al., 2015; Santiago et al., 2012). Additionally, not completing high school has been found to contribute to poverty, homelessness, unemployment, and a lack of career and employment opportunity (Hynes, 2014; Rumberger, 2012). Among dropouts, 16% are unemployed and a little over 30% are living in poverty (Khatiwada et al., 2014; Lessard et al., 2009; Messacar & Oreopoulos, 2013). Credentials, such as a high school diploma, are often needed in order to find decent wage jobs (Khatiwada et al., 2014). Adults with low skills and a lack of credentials have less job security and career outlook (O'Neill & Thomson, 2013). Thus, there is a lack of opportunity for noncompleters, and doors are

often closed for these individuals because of the lack of necessary credentials and skills (Hynes, 2014).

Economic issues are a concern for counselors because of the relationship between poverty and mental health. Santiago, Kaltman, and Miranda (2013) shared that poverty is linked with mental health concerns and poor psychological outcomes. Low-income adults and children are at increased risk for mental health concerns as a result of economic hardship as well as exposure to violence, traumatic experiences, disadvantaged living, and disruptions to the family (Santiago et al., 2013). In addition, racial and ethnic minorities as well as historically oppressed and disadvantaged communities are overrepresented in dropout rates (Miller et al., 2010; Rumberger, 2012), and often experience higher rates of unemployment and limited personal beliefs about potential and opportunity (Toporek & Cohen, 2017). Obtaining an HSE could improve economic outcomes having a positive impact on overall health for the high school noncompleter as well as their family (Miller et al., 2014).

The research consistently shared that noncompletion is linked with economic hardship, unemployment, and poor career outlook (Hynes, 2014; Messacar & Oreopoulos, 2013; Rumberger, 2012; Santiago et al., 2013; Stark & Noel, 2015). In addition, individuals of lower socioeconomic status, ethnic and racial minorities, and historically marginalized and oppressed communities experience hardship, a lack of opportunity, and are at higher risk for noncompletion (Miller et al., 2010; Rumberger, 2012; Stark & Noel, 2015). Noncompleters are typically lower socioeconomic status before dropping out (Dockery, 2012; Fergusson et al., 2015; Stark & Noel, 2015), and

when they drop out they often face additional economic hardship as a result of not having obtained a necessary credential, a high school diploma (Khatiwada, 2014, Messacar & Oreopoulos, 2013; O'Neill & Thomson, 2013). Economic concerns are pertinent for counselors because economic barriers, such as poverty, homelessness, and unemployment are linked with higher rates of mental health and health related issues (Santiago et al., 2013). The following sections will discuss health and mental health related barriers surrounding noncompletion.

## **Health**

Noncompleters face barriers related to health. Maynard et al. (2015), Vaughn et al. (2014), and Rumberger (2012) shared that high school noncompletion is a significant health problem in the United States. Many noncompleters experience health-related problems, which contribute to early departure from high school (Hynes, 2014). In addition, children of noncompleters have poorer health (Dockery, 2012). In general, individuals with lower literacy levels have decreased health and well-being (Miller et al., 2010). However, improving literacy and obtaining a high school equivalency credential could improve health-related outcomes for the individual and their family (Miller et al., 2010).

High school noncompleters are also more likely to smoke cigarettes, use illicit drugs, and in general, be less healthy (Messacar & Oreopoulos, 2013). However, in regards to alcohol use, interestingly, Maynard et al. (2015) found that noncompleters reported less binge drinking than high school graduates. This phenomenon was hypothesized to be because noncompleters are typically not in college and, therefore, do



not engage in college drinking, which often includes binge drinking (Maynard et al., 2015).

Overall, noncompleters face health related concerns that are connected with noncompletion and educational functioning (Hynes, 2014; Maynard et al., 2015; Rumberger, 2012; Vaughn et al., 2014). With the presence of health concerns for noncompleters, helping to improve education outcomes, including obtaining high school credentials, could improve health outcomes (Vaughn et al., 2014).

### **Mental Health**

In addition to economic and health related issues, common themes among high school noncompleters include mental health concerns, such as exposure to trauma, violence, abuse, substance addiction, unsafe environments (Hynes, 2014). Individuals who did not obtain a high school diploma through traditional means (graduating from high school) have increased health-related concerns including mental and behavioral (Maynard et al., 2014; Zajacova & Everette, 2014). Noncompleters may be increased risk for mental health issues, and are two times more likely to report recent suicide attempts than high school completers (Maynard et al., 2015). Meek et al. (2017) also shared that adult remedial education students have more challenges than high school aged students, including higher rates of mental health issues. Furthermore, Fergusson et al. (2015) argued that noncompletion is not the cause of mental health concerns post dropout. Instead, mental health issues may be from other considerations, such as, social constructs, home environment, and exposure to violence, that were present before dropout (Fergusson et al., 2015). Fergusson et al. (2015) added that economic disparities

as a result of noncompletion could contribute to mental health concerns. The next section will explore mental health and economic concerns.

**Mental health and economic concerns.** As mentioned earlier, noncompletion is linked with poverty (Hynes, 2014). Individuals in poverty are more likely to have mental health concerns and emotional and psychological challenges yet children and adults who live in poverty are less likely to access mental health services (Santiago et al., 2013). Poverty contributes to high-stress environments as a result of economic strain, as well as increased exposure to violence, conflict, stress, frustration, and other anxiety-provoking situations (Santiago et al., 2013). These stressors and challenges can get in the way of educational and occupational opportunities further perpetuating the life with mental health concerns and life in poverty, yet individuals and families in poverty do not have adequate access to quality mental health care (Santiago et al., 2013). Some of the barriers preventing individuals in poverty from accessing mental health care include the lack of adequate transportation and medical insurance coverage, limited access to mental health care, cultural beliefs and concerns with stigma, and responsibilities with providing basic needs (Santiago et al., 2013). In general, noncompleters are less likely to access mental health care because of the perceived barriers (Maynard et al., 2015).

**Mental health and schools.** In general, students benefit from the ability to manage stressors (Tarabochia, 2013). However, despite increasing school stress, schools do not adequately help students manage stress (Tarabochia, 2013). While the ASCA (ASCA, 2012) model provides an opportunity for school counselors to integrate stress management and reduction to improve overall mental health (Tarabochia, 2013), mental

health interventions to address noncompletion have not adequately been addressed (Maynard et al., 2015). Most interventions in schools address academic and educational needs and miss the opportunity to address mental health (Maynard et al., 2015). This gap seems has been acknowledged by professionals in school settings. Meek et al. (2017) explored the perspective of teachers working with adult remedial learners regarding their ability to handle mental health issues. In the study, teachers reported that their students had mental health needs, but they were not equipped to meet their student's needs and did not have access to resources, such as mental health professionals (Meek et al., 2017). Additionally, Santiago et al. (2013) shared that primary care providers and support staff who work with low-income students report feeling unprepared to deal with the complex and unique issues of low-income adults and children.

**Emotional and psychological.** A review of the literature also explored emotional and psychological barriers of high school noncompleters. Meek et al. (2017), and O'Neill and Thomson (2013) found that individuals who enter ABE and ASE have above average levels emotional and psychological challenges such as anxiety, stress, and frustration. The prevailing concerns among adult remedial learners in HSE programs were stress, anxiety, depression, substance abuse, and anger (Meek et al., 2017). In addition, past negative experiences with school, and increased emotional and psychological challenges such as stress, anxiety, frustration, as well as decreased self-esteem and poor self-concept make it difficult for high school noncompleters to succeed (O'Neill & Thomson, 2013). They often experience psychological barriers such as lower confidence in their academic abilities and lower academic self-efficacy (Koch et al.,

2012; O'Neill & Thomson, 2013). In general adult learners often have lower self-confidence and self-concept (Ross-Gordon, 2011; Jameson & Fusco, 2014). Negative self-perception and social and personal narratives can prevent individuals from overcoming barriers and establishing positive career identities (Jameson & Fusco, 2017; Toporek & Cohen, 2017).

The literature supports a concern for mental health among noncompleters. Noncompleters experience increased levels of emotional and psychological issues as well as increased stress (Meek et al., 2017; O'Neill & Thomson, 2013). In addition, the literature included consistent themes regarding mental health and noncompleters, economic considerations, school settings, and the competence in addressing mental health needs. The lack of adequate mental health care and literature surrounding mental health in adult remedial education is concerning. Overall, mental health is an important component of achievement and is important for the success of adult remedial learners, yet there is limited research that explores promoting mental health in adult remedial education (Meek et al., 2017). The next section will provide information on counseling services to address mental health needs.

### **Counseling Support**

Given the barriers that noncompleters face, addressing their needs is necessary. The review of the literature explored counseling as a support for noncompleters. However, there was little information specifically related to noncompleters and adults in remedial education settings for high school equivalency. Of the information related to noncompleters in adult remedial settings, O'Neill and Thomson (2013) shared that it is

essential to develop confidence and self-efficacy in helping adult remedial learners (O'Neill & Thomson, 2013). In addition Coogan and DeLucia-Waack (2007) and Koch, Slate and Moore (2012) shared that counseling services can help noncompleters understand their needs and help them to resolve emotional, social, and behavioral concerns. This is particularly useful because noncompleters often have difficulty with setting goals, and feeling connected to adults and institutions. With supports, such as counseling, adult remedial learners will benefit (Hynes, 2014).

While information specific to noncompleters in adult remedial education was limited, there was information available on school counseling in primary, secondary, and postsecondary settings. The following sections will present literature related to school counseling general, school counseling in other educational settings, and the barriers that are present across settings and application of services.

### **School Counseling**

Counseling services and centers are becoming more important in supporting students' emotional needs (Hjorth et al., 2016), and school counselors are one of few professionals that can address the needs of students with emotional difficulties (Miller & Rainey, 2008). The ASCA (2012) national school model identifies the role of school counselors in providing counseling services to help students, particularly those who are marginalized and at-risk. The literature was consistent in recognizing the benefits of school counseling and the role counselors have in supporting students, particularly those that are at-risk and face barriers. According to Carlson and Kees (2013) and Williams et al. (2015), counselors are called to provide prevention and intervention that address the

challenges and barriers that students face. Counselors create a safe and trusting environment and help to improve self-efficacy, motivation, and attitudes toward schools (Rowell & Hong, 2013). They also work to promote strengths, find solutions, and utilize strategies that increase the chance of student success (Grothaus & Cole, 2010). In general, interaction with a counselor was found to have a positive affect on attendance, test scores, and postsecondary transition (Coogan & DeLucia-Waack, 2007; Lapan, Poynton, Marcotte, Marland, & Milam, 2017). Overall, counseling is valuable to helping academically vulnerable and at-risk students (Bryan et al., 2009; Patterson, 2014) and could help students at risk of drop out to set goals and to feel connected (Hynes, 2014; Koch et al., 2012).

### **Challenges**

In spite of the benefits of counseling, there are many barriers to providing counseling in schools and for adult remedial learners. The review of the literature uncovered several themes related to challenges with counseling. Some of the barriers include the student-to-counselor ratio, funding, counselor identity, and the need for more training (Bettinger et al., 2013; Kaffenberger & O'Rourke-Trigiana, 2011; Miller & Rainey, 2008; Owens et al., 2009). The following section will explore the literature related to these barriers.

**Providing services.** Students are most likely to follow-up with school-based mental health services (Kaffenberger & O'Rourke-Trigiani, 2013). These services help students overcome barriers and can reduce the stigma of seeking counseling (DeKruyf et al., 2013). Yet, despite these benefits, only a fraction of students who need mental health

services get them (Dekruyf et al., 2013). For adult remedial learners, many do not feel comfortable seeking support and advisement from a counselor despite being faced with unique academic challenges (Mangan, 2015). In addition, students of color, as well as minorities, are overrepresented in noncompletion rates and often do not receive adequate counseling support despite being the most at-risk (Bryan et al., 2009).

While the mental health needs of students are increasing, community mental health support is decreasing, highlighting the importance for school counselor to address the emotional and psychological needs of students (Carlson & Kees, 2013). Mental health issues that go unaddressed can result in additional barriers for students, particularly those who are already disadvantaged (ASCA, 2012). This is not a new problem. In 1999, Downs wrote about the role of school counselors and the lack of emphasis on mental health. This problem has been identified for decades, yet the absence of adequate mental health care in schools persists. Walley and Grothaus (2013) shared that school counselors must be able to respond to the need of mental health issues in schools. However, the counselor to student ratio poses challenges for access to counseling services. Mangan (2015) shared that the ratio at the college level is one counselor to 1,000 students and remedial learners often do not have access to counseling support. In a separate study, Bettinger et al. (2013) reported the counselor to student ratio as one to 1,500 students. Overall, this ratio makes it difficult for counselors to provide services and for students to have access to services. In addition to barriers surrounding counseling services, there are also barriers in regards to counselor training. This barrier is explored in the next section.

**Counselor training.** DeKruyf et al. (2013) shared that only a small number of students actually receive mental health services and an increased focus on school counselor identity in meeting the mental health needs of students is needed. Historically, the role of a school counselor has focused on leadership and academics, however, with the unmet mental health needs of students, lack of reliable community mental health services, and the undeniable connection between mental health and school performance, school counselors need to take a more active role (DeKruyf et al., 2013). When counselor training is present, school counselors report not feeling equipped to handle the mental health needs of students. School counselors report questioning whether or not they should address mental health issues and often experience resistance and the lack of support when attempting to provide services (Walley & Grothaus, 2013). In addition, school counselors report needing more training regarding dropout and violence prevention as well as strategies for working with unmotivated students (Owens et al., 2009). In a review of school counseling conference sessions, only about 15% of sessions focus on counseling or mental health (DeKruyf et al., 2013). School counselors have requested more training for working with students with emotional difficulties and mental health needs (Carlson & Kees, 2013; Kaffenberger & O'Rourke-Trigiani, 2011; Miller & Rainey, 2008). Another challenge is that school counselors do not get adequate supervision (DeKruyf et al., 2013). Supervision is an essential component to professional development and maintaining competency, yet supervision for school counselors is limited and often disconnected (Swank & Tyson, 2012).

Overall, counseling is a beneficial support that can help at-risk students find



success. For noncompleters, this support can help them to overcome unique barriers that they face. However, despite the many benefits of counseling, there remains a gap in the services provided. Some of these gaps are as a result of high student-to-counselor ratios, limited training for counselors, skewed counselor roles, the stigma of seeking counseling, and the limited access to counseling (Bettinger et al., 2013; Kaffenberger & O'Rourke-Trigiani, 2011; Mangan, 2015; Miller & Rainey, 2008; Owens et al., 2009; Walley & Grothaus, 2013). This is particularly concerning for students who are at-risk and in need of such services. The literature emphasized that, for these individuals, services are needed. However there was a lack of literature specifically addressing the needs of noncompleters. What is known if this population is that they face unique barriers that could benefit from counseling, yet the literature and services have not yet adequately addressed such.

### **Summary and Conclusion**

The review of the literature included an exploration of high school noncompletion, adult remedial learners, adult remedial education, barriers for noncompleters and adult remedial learners, and counseling services for this population. There was limited literature specifically regarding noncompleters in adult remedial education settings. This review extended into other academic settings in order to understand barriers, noncompletion, and counseling surrounding the topic. What was uncovered is that circumstances surrounding dropout is complex and multidimensional, however, common themes include hardship and difficult circumstances. After dropout, these challenges do not go away for noncompleters. Instead, these challenges may

become barriers making success and achievement difficult for adult remedial learners. Supports, such as counseling services, can help these individuals to achieve success and overcome barriers. However, there are additional barriers surrounding counseling services that prevent adequate services from being implemented.

Overall, this review of the literature uncovered reasons for noncompletion, the presence of barriers surrounding noncompleters, and the challenges with providing counseling services supports in primary, secondary, and postsecondary settings. There was little information specific to noncompleters in adult remedial education. More information is needed in order to better understand this population and their unique experiences. This research aims at adding to the literature surrounding this population. Using a hermeneutic phenomenological approach, this study uncovered rich and in-depth experiences of noncompleters in adult remedial education regarding emotional and psychological experiences prior to dropout and through enrollment in an equivalency program.

## Chapter 3: Research Method

### Introduction

Individuals who do not complete high school often face challenges, including mental health-related concerns, prior to dropping out of high school. As high school students, these individuals may receive counseling services; however, in school settings, counselors are often tasked with providing academic support rather than helping students address emotional and psychological concerns (Morris & Slaten, 2014). The mental health challenges that these individuals face in high school often remain with them into adulthood (Fergusson et al., 2015; O'Neill & Thomson, 2011). When they become adults, they may have even less access to counseling services (Meek et al., 2017). There is literature available regarding counseling and mental health for students in high school and postsecondary institutions. However, in relation to individuals HSE programs, there is a gap in the literature on counseling and mental health. What is known about high school noncompleters is that they have higher levels of stress, anxiety, and frustration, as well as economic hardship and concerns related to poverty, such as poorer health and mental health (Lee et al., 2013; Williams & Seary, 2011; Zajocova & Everett, 2014). Still, in comparison literature concerning traditional learning settings, the information available on supports and services that address the mental health of individuals in HSE programs is lacking (Meek et al., 2017). This study aimed at understanding the experiences of these individuals with emotional and psychological challenges prior to dropout and through enrollment in an equivalency program.

Previous chapters introduced and provided a background for this study. Chapter 1

introduced the problem statement, research questions, theoretical framework, nature, definitions, assumptions, scope and delimitations, limitations, and significance of the study. Chapter 2 detailed the literature surrounding this study, the conceptual foundation of hermeneutic phenomenology, and key concepts regarding adult remedial education, emotional and psychological barriers for high school noncompleters and adult remedial learners, and counseling supports for this population. This chapter provides a detailed description and explanation of this study's research design and rationale, my role as the researcher, the study methodology, trustworthiness, and ethical considerations. In the methodology section, I discuss the participant selection logic; sampling and sampling procedures; procedures for recruitment, participation, and data collection; the data analysis plan and steps; trustworthiness; and ethical procedures.

### **Research Design and Rationale**

This study was designed to explore the phenomenon of adult remedial learners' experiences with emotional and psychological challenges prior to dropout and through enrollment in an equivalency program. This study explored the experiences of adult remedial learners regarding barriers, successes, and counseling. The research question was the following: How do adult remedial learners experience emotional and psychological challenges prior to dropout and through enrollment in an equivalency program? Subquestions addressed experiences with counseling, barriers to success, and how participants overcame such barriers.

In order to answer the research question and subquestions, a phenomenological approach was selected for this study. A phenomenological approach aligned with the

research question and purpose, as both focused on the lived experience of participants.

Ravitch and Carl (2016) and Bloomberg and Volpe (2016) shared that phenomenological research aims at uncovering the rich experiences of participants. This was the intent of this study.

### **Hermeneutic Phenomenology**

Phenomenology is both a philosophy and qualitative approach to research (Patton, 2015; Sloan & Bowe, 2014). It has roots as a philosophical view of the making of meaning from an individual's experiences, and it is a reflection on the lived experience of human existence (van Manen, 2007). As a research approach to data collection and analysis, qualitative methods focus on the perspectives and experiences of participants (Creswell, 2013; Patton, 2015; Sloane & Bowe, 2014). With a phenomenological lens, focus is put on the phenomenon of interest instead of adherence to preexisting theories (Maxwell, 2013). When researchers adhere too closely to theories, blind spots, bias, and distorted analysis and data collection may occur (Maxwell, 2013).

Interpretive phenomenology, or hermeneutic phenomenology, was introduced by Martin Heidegger (Wrathall, 2006). Heidegger's view was that individuals are a part of the world and experiences cannot be separated, or bracketed, out (Heidegger, 1962; Sloan & Bowe, 2014; Wrathall, 2006). As a philosophy, hermeneutic phenomenology provides a framework for interpreting and making meaning of experiences and perspectives (Creswell, 2013; Patton, 2015, Wrathall, 2006). Using this qualitative approach, researchers work to identify key themes and interpretations of the experiences of participants (Gibbs, 2009; Maxwell, 2013; Pascal, 2010; Patton, 2015). The goal of a

phenomenological study is to understand and explain experience through interpretation and establishing meaning in context (Gadamer, 1989; Patton, 2015).

Unlike transcendental phenomenology, hermeneutic phenomenology does not use bracketing (Patton, 2015; Tavallaei & Talib, 2010). *Bracketing* refers to a systematic way in which researchers can identify and make note of their personal views, beliefs, thoughts, and prior knowledge related to a study (Creswell, 2013; Ravtich & Carl, 2016). Within a hermeneutic framework, a researcher's interpretation is viewed as being present throughout the research process and cannot be bracketed out (Gadamer, 1989; Patton, 2015). Instead, the researcher is part of the process, and the researcher and their understanding is embedded throughout the research process (Patton, 2015). All understanding comes from the self and is derived from preunderstanding, which is necessary for new understanding to develop (Gadamer, 1989). Preunderstanding is seen to influence new understanding, whether the researcher is aware of it or not (Gadamer, 1989). From a hermeneutic framework, a new understanding builds on preunderstanding, or *forestructure* (Tuohy et al., 2013).

Through the hermeneutic circle, researchers can arrive at new and more in-depth understanding (Boell & Cecez-Kecmanovic, 2010). Gadamer (1989) shared that the hermeneutic circle is an approach to understanding in which a researcher moves between and from parts to build a larger understanding of the phenomenon as a whole. Emphasis is on understanding through finding meaning through themes and interpreting the data rather than uncovering the essence through descriptions (Sloan & Bowe, 2014). The hermeneutic circle is a process of understanding and involves moving back and forth

from individual elements of data to the larger picture to arrive at a deeper and comprehensive understanding (Gadamer, 1989). Preunderstanding is revised, and new information is used to form in-depth meaning. This occurs through a spiral process in which the researcher absorbs the data as a whole, then analyzes parts and synthesizes parts with the whole in order to arrive at in-depth meaning (Sloan & Bowe, 2014).

### **Role of the Researcher**

In qualitative research, the researcher is the instrument because they conduct, guide, and focus the data collection process (Ravitch & Carl, 2016). The researcher's role is to establish rapport with participants, create an environment that is comfortable, and guide and direct interviews to uncover participants' truth (Maxwell, 2013; Ravitch & Carl, 2016). The Gadamerian perspective of hermeneutics is that through conversation, an understanding occurs (Austgard, 2012). It is when the interviewer interprets and truly comprehends that the miracle of understanding takes place (Austgard, 2012). As the researcher, I was the interviewer; therefore, my role included conducting and guiding the interviews in order to uncover the essence of participant experiences. Conducting interviews also included being an observer of the process, as well as participant reactions and nonverbal behaviors. To do so effectively, I needed to be aware of any potential bias that might influence data collection and analysis (Ravitch & Carl, 2016). A researcher's responsibility is to be transparent about how their perspective, beliefs, attitudes, and values might impact their research (Saldana, 2016).

Reflexivity is an integral part of hermeneutic phenomenology, as reflection and examination of one's understanding is important in understanding how one interprets and

uncovers meaning (Sloan & Bowe, 2014). Reflexivity requires researchers to investigate their position and identify their beliefs, values, understanding, interests, and motivations (Clancy, 2013; Shaw, 2010). The purpose of reflexivity is not to provide an explanation of a phenomenon; rather, reflexivity serves to shed light on understanding and on the experience of understanding (van Manen, 2007). Researchers use preunderstanding and prior experiences to assist with analysis and interpretation, resulting in new meaning (Sloan & Bowe, 2014). In being reflexive, researchers engage in self-examination to identify their preunderstanding and how this may influence the research (Clancy, 2013).

My preunderstanding included experience working with individuals who had obtained HSE credentials, as well as having family members who departed early from high school and earned an HSE credential. My preunderstanding also comes from working with at-risk high school students who were on the verge of dropping out. My experiences and basic understanding of this population fueled my interest in obtaining a more in-depth understanding of high school noncompleters. My background as a counselor influenced my interest in understanding the emotional and psychological experiences of this population. Additionally, my background as an educator provided me with an understanding of student experiences and educational systems, as well as the barriers and challenges that students, teachers, and counselors face. Moreover, my experience of being born and raised in Hawaii had provided me with preunderstanding of cultural elements such as language, cultural values, and other nuances that are important to life in Hawaii. Throughout the research process, I was mindful of my preunderstanding. In order to keep track of and monitor my preunderstanding, I engaged



in self-reflection through journals, memoing, and consultation. This practice of reflexivity helped me to be aware of any potential bias, ensure transparency, and keep a record of my responses, reactions, and perspectives. For example, as I was interviewing participants, my professional practice of being a counselor would surface from time to time, and I needed to remind myself of my role as a researcher. There was an instance in which a participant began to share about a traumatic experience and I had the initial inclination to process with her about her trauma; however, I remained focused on my role as a researcher, which was to uncover her lived experience rather than process her trauma. This experience was documented in my journals.

### **Potential Personal or Professional Relationships**

This study took place at the school in which I am employed. However, in my position, I do not work with the population that was the focus of this study, and I have minimal, if any, contact with students in the remedial education (ABE and HSE) classes from which participants were recruited. Regardless, because I am personally invested in the success of adult education students, I needed to carefully record my thoughts, decisions, attitudes, and beliefs. Self-reflection was an integral part of this study and took place through journals, memos, and consultation with my dissertation committee, my mentors, and other experienced research professionals.

In addition to remaining alert to potential bias, I needed to be aware of perceived power imbalances. Recruitment flyers were posted on campus and handed out to students in class. Teachers were instructed to simply hand out the flyers rather than give directions to minimize the potential for coercion. When contacted by interested

participants, I thoroughly informed participants through the informed consent process of the research process and their rights. Participants might have felt that they were required to participate because I was a school staff member, so to minimize potential coercion, the informed consent process included full transparency regarding my role with the school and participant rights. I explained my role and participants rights verbally as well as in writing. The informed consent form was written at approximately a fourth-grade reading level using the Flesch-Kinkaid readability formula. According to the U.S. DOE OCTAE (2015) *Annual Report to Congress 2011-12*, 80% of students enrolled in adult education classes scored at least at the fourth-grade level. Based on these data, this readability level should have been sufficient for an informed consent document for the sample population.

## **Methodology**

### **Participant Selection Logic**

Participants were recruited from a Community School for Adults (CSA), which is an adult education program offered through the State of Hawaii Department of Education. The target population included adult remedial learners, defined as noncompleters, who were enrolled in adult remedial education (ABE or HSE) classes with the CSA, were 18-25 years of age, spoke English as their primary language, and self-reported experiencing certain emotional and psychological challenges including, but not limited to, anxiety, stress, depression, and frustration. Participants aged 18-25 were selected for this study because this age range is considered to be the stage of emerging adulthood. According to Maynard et al. (2015) and Arnett (2005), individuals in this developmental stage experiment with work and life and may engage in risky behaviors.

In this stage between adolescence and mature adulthood, individuals experience role and identity confusion (Maynard et al., 2015). This developmental stage has not been widely researched in mental health but has been recognized as an area in need of attention, particularly given the potential for risky behaviors including substance use, criminality, and mental health concerns (Maynard et al., 2015).

Participants who spoke English as their primary language were recruited to ensure that there would be no issues as a result of miscommunication related to language discrepancies. As such, students in ELA classes were not recruited for this study. Individuals in ELA courses are primarily enrolled to improve English skills. These individuals may experience barriers as a result of language acquisition, which was not the primary phenomenon of focus for this study.

### **Sampling and Sampling Procedures**

My study used purposeful convenience sampling with snowball sampling. Purposeful sampling is used when the aim of the research is to uncover rich and in-depth information regarding a particular phenomenon of interest, and convenience sampling is used for ease of access to a particular population of interest (Bloomberg & Volpe, 2016; Grosseohme, 2015; Palinkas et al., 2013). Purposeful convenience sampling was used to select participants from ABE and HSE classes at the site. Snowball sampling was used to reach additional participants. Interested participants were invited to share the recruitment flyer and information with others who might be interested.

For phenomenological research, typical sample sizes range from five to 25 participants (Creswell, 2013). Qualitative research designs typically use smaller sample

sizes than quantitative methods (Creswell, 2013; Grosseohme, 2015; Patton, 2015).

Patton (2015) suggested that researchers identify a minimum sample size to start with and then make adjustments along the way as needed. A range of 6-10 participants was projected for this study. Saturation was reached at seven participants. *Saturation* refers to the point in which no new information is obtained (Hennink, Kaiser, & Marconi, 2017; Creswell, 2013). If saturation had not been obtained within the projected sample size, additional participants would have been selected.

Challenges with recruitment occurred as a result of participant attitudes toward educational institutions. O'Neill and Thomson (2013) stated that adult education students tend to have reservations toward formal institutions. The first call for participants yielded only one participant, and volunteers trickled in after that. Recruitment took place over a 7-month period and five calls for participants were sent out.

### **Procedures for Recruitment and Participation**

In total, there are seven main sites within the coverage area of the CSA in which participants were recruited from. In addition to the seven main sites, the CSA works with partner programs and satellite sites to offer ABE and HSE classes as well as educational services. In order to recruit participants from the CSA, I needed approval from the State of Hawaii Department of Education Data (HIDOE) Data Governance and Analysis Branch (DGAB) in addition to IRB approval. After my proposal was approved, I submitted my IRB application and was granted conditional approval on the condition that I received approval from HIDOE to conduct my study. I submitted a research request to the HIDOE DGAB. A data-sharing agreement (DSA) was granted by HIDOE DGAB on

the condition that I receive full IRB approval. I submitted the DSA to the IRB and was granted full approval (#10-29-18-0597174). Once full IRB approval was obtained, I submitted verification to the HIDEOE DGAB and was given approval to conduct my study. At that point, I contacted the CSA campus administrators to ask for approval and assistance in recruiting participants for my study.

Using the course catalog, which was open to the public, I identified ABE and HSE courses and recruited participants from these classes. Recruitment took place through IRB-approved flyers (see Appendix A), which were placed at the main office of each campus as well as distributed to ABE and HSE classes across sites. On the flyers, I explained and identified the nature of the study as well as the purpose of the study. My contact information was provided for individuals who were interested in volunteering to participate.

During initial contact with potential participants, I asked questions to determine whether they met the inclusion criteria. These questions determined if they did not complete high school, were enrolled in an ABE or HSE course, were 18-25 years of age, used English as their primary language, and had experienced emotional or psychological challenges including, but not limited to, anxiety, stress, depression, and frustration. If a potential participant met the inclusion criteria, I set up a day and time to conduct an interview. After interviews, participants were given additional flyers to hand out to others they thought might be interested in participating in the study. No incentives were given to participants.

## **Data Collection Method**

Based on the research question for this study, data collection occurred through individual in-person (face-to-face) in-depth semistructured interviews. With in-depth interviews, researchers use open-ended questions to obtain in-depth information from participants (Rubin & Rubin, 2012). This method aligns with a hermeneutic phenomenological framework which focuses on understanding the rich experience of participants (Kafle, 2011). In-person interviews allow researchers the opportunity to gather information from participants (Creswell, 2013). Creswell (2013) and Ravitch and Carl (2016) shared that in-person interviews help researchers to build rapport with participants. Semistructured interviews provide a base structure with preset questions (Maxwell, 2013). A set of 10 interview questions were predetermined (see Appendix B). Semistructured interviews also allow for space and flexibility to ask engaging follow-up questions and more in-depth questions based on participant response and the progress of the interview (Maxwell, 2013; Ravitch & Carl, 2016). In addition to the 10 interview questions, follow-up and probing questions were asked. Rubin and Rubin (2012) shared that interview questions are not fixed in semistructured interviews. Researchers can mix up, add, eliminate, and reword questions. This method is useful for hermeneutic phenomenology because researchers can adapt to uncover the experiences of participants. Follow-up member-checking interviews were conducted to clarify information and offer an opportunity for participants to add or correct information.

## **Site**

Qualitative research can take place in real-world environments (Patton, 2015;

Ravitch & Carl, 2016). In-person interviews took place on-site at the CSA campuses or sites. Participants were scheduled for interviews outside of class time. Interviews were conducted on-campus because participants were familiar and comfortable with this setting and the environment is natural to the population in this study. Using a natural and familiar setting helps participants to feel comfortable and works to protect confidentiality (Creswell, 2013). Classrooms or office spaces that were familiar to the participants and set aside from student and staff traffic were used. The follow-up interviews took place over the phone or in-person (for participants that did not have access to a phone). The in-person member-checking interviews were conducted in the same setting as the primary interview.

### **Instrumentation**

Jacob and Furgerson (2012) shared that long interviews can be tiresome for participants and can make it harder to recruit participants for interviews longer than 90 minutes. Therefore, interviews were projected to last approximately 60 minutes. On average, the interviews lasted 42.5 minutes with a range of 20 to 65 minutes. Data collection included a brief demographic survey (see Appendix C) which was used to collect data on participant gender, age, race, income range, last grade of high school attended, and where they live. Participant contact information was also collected. Contact information was used only to schedule the follow-up member-checking interviews. Demographic information was compiled and summarized in a separate chart and the forms were kept separate in a separate file. The interview tool consisted of ten pre-determined interview questions (see Appendix A). Castillo-Montoya (2016) shared

that interview questions should be in alignment with the research question and be aligned with the research purpose. The interview questions for this study include (a) What were your prior school experiences like? (b) What are your current experiences with school? (c) What, if any, has been your experience with challenges with thoughts, attitudes, and feelings about school? (d) What, if any, differences have there been in your experiences with thoughts, attitudes, and feelings throughout school and your life (during high school, after dropping out, and now that you have returned to school?) (e) What, if any, barriers to your success have you experienced? (f) What has been your experience with overcoming your barriers? (g) What has your experience been with feeling supported? (h) What has been your experience with counseling? (i) What other experiences related to your mental health and well-being would you like to share? (j) Is there anything else you would like to share about your experiences with school, counseling, and barriers that we have not yet discussed?

Interview questions should be structured with more general and less threatening questions to start (Castillo-Montoya, 2016). Therefore, the interview began with the general question inquiring about prior and current experiences with school and moved to more specific questions about emotional and psychological challenges and barriers. The interview ended with questions regarding how participants overcame barriers, what their experiences were with counseling and feeling supported, and their mental health and well-being. Additional follow-up and probing questions were asked for clarification and to gather rich and more in-depth data. These questions dove a little deeper into participant experiences. For example, participant one (Nalani) mentioned having anxiety.



A follow-up question asked her about how she experienced anxiety. Her responses yielded a deeper understanding of anxiety. For her, the anxiety was debilitating and she had both physical and cognitive symptoms. Follow-up and probing questions were also asked to gain clarification regarding any inconsistencies in participant stories. For instance, if a participant shared that they never saw a counselor, but then later said that they were called in to the counselor's office. I asked a follow-up question to clarify their experiences with counseling. The interview wrapped up with an opportunity for participants to share anything else that had not yet been discussed.

Upon completion of the interviews and after the interviews were transcribed and initial analysis is done, follow-up member-checking interviews took place to check for understanding, gain clarification, and add additional insight. Member-checking interviews took place over the phone and lasted on average 20.5 minutes with a range of 11-30 minutes. Once these interviews were completed, they were transcribed and analyzed.

### **Data Analysis Plan**

Data analysis from a hermeneutic phenomenological perspective is interpretive. This means that this approach seeks to interpret and understand a phenomenon rather than describe a phenomenon. This study utilized in-depth interviews, verbatim transcripts, and qualitative analysis through the process of the hermeneutic circle in order to uncover the rich experiences of participants as it related to the research questions. Throughout the research process, journal and memo writing were used to record my process as the researcher (Creswell, 2013; Saldana, 2016). These journals and memos

were then used to analyze the data through the hermeneutic cycle and to help me keep track of and record definitions and notes regarding codes and participant experiences.

The first step of this study was to conduct and audio record interviews. In the second step, I created verbatim transcripts for each interview after each interview. According to Maxwell (2013), verbatim transcripts are a way to achieve rich and in-depth data. In the next step, I read the transcripts and conducted first round codes to generate preliminary meaning units. These meaning units were the descriptive codes developed from words and phrases in the interviews. Descriptive codes are described as hashtags, which are short summaries of key points and ideas (Saldana, 2016). For example, several participants shared about a major life event that they experienced prior to them dropping out. The first round codes generated were *Pregnant*, *Death of Grandfather*, *Death of Best Friend*, *Kicked out of Home*, *Moved*, and *New Biological Father*.

Once preliminary data units were developed, gaps in the data and areas for clarification were identified. Gaps were pieces of information that was either unclear or missing in the initial interview and transcript. Member-checking interviews took place after gaps were identified. As mentioned, member checks are check-ins with participants to ask for clarification and additional details (Maxwell, 2013). It is a way for researchers to improve validity as well as clarify, confirm, and modify initial analysis of the first interview (Maxwell, 2013). This strategy is consistent with an interpretive phenomenological framework (Birt et al., 2016). These check-ins can occur several ways, one of which is returning transcripts to participants and checking in with them for accuracy (Birt et al., 2016). While some participants appreciate seeing their words on

paper, for others, it can result in an uncomfortable situation resulting difficult emotions and take ownership of the experience away from the participant (Birt et al., 2016).

Therefore, the fourth step was to conduct follow-up (member-checking) interviews rather than provide participants with a transcription of the initial interview. These interviews were an opportunity to follow-up on any gaps. The member-checking interviews were audio recorded and transcribed, and secondary meaning units were generated to fill in gaps. For example, participant 3 (Pono) said that he attended five different high schools and said “every high school I went to was only for one quarter, then I left.” A first round codes for participant 3 was *Moved Around*. After the member-checking interview, additional clarification was obtained. The actual act and process of moving around was not the main challenge. Rather, for the participant, it was having inconsistencies and a lack of stability in their life. Thus, a second round code of *Instability* was used.

Lastly, final meaning units were generated and synthesized into major themes and meaning was generated based on the data from participant experiences. In qualitative research, data is analyzed for themes and patterns (Saldana, 2016). Referencing the earlier example, when asked about their prior experiences with school, participants talked about the events that led up to their early departure from school. The codes of *Pregnant*, *Death of Grandfather*, *Death of Best Friend*, *Kicked Out*, *Moved*, and *New Biological Father* were all used for life events that had an impact on participants’ lives and contributed to their decline in academic performance. These codes were synthesized into the theme of *Major Life Events* which was used to describe significant events that took place that altered the trajectory and path (including academic) of the participant.

After analyzing and examining the data, any discrepant cases would not have been included in the final synthesis of the data. Coromina et al., (2011) shared discrepant cases are analyzed to determine whether or not they add or contribute new meaning and information to the study. These cases would have been instances in which the data from one participant was not found in other interviews. While participant experiences may have been unique to the individual, they were similar in trend to that of other participants. For example, only one participant got pregnant in high school. While this experience was unique to this participant, it was common with the overall trend of having experienced a major life event.

**Data Analysis Steps**

1. Conduct and record interviews
2. Create verbatim transcription after each interview
3. Read transcripts and create preliminary meaning units (primary codes) based on words and phrases
4. Schedule and conduct follow-up member-checking interviews to identify any gaps and add clarification.
5. Create verbatim transcription follow-up member-checking interviews
6. Read follow-up interviews to generate secondary meaning units (secondary codes)
7. Analyze preliminary and secondary meaning units to generate final meaning units and themes
8. Synthesize data and generate a general narrative and description

## **Trustworthiness**

Trustworthiness refers to the process used implement to ensure methods and strategies are in place to improve the strength of the research (Ravitch & Carl, 2016). In qualitative research, criteria of trustworthiness include credibility, dependability, and transferability.

### **Credibility**

Credibility refers to the accurate interpretation of the participants' perspective and experience, or the internal validity. To ensure credibility self-reflection took place throughout the research process. Memos and journals were written throughout the planning, data collection, and data analysis phases of the study. Using self-reflection, researchers can better understand and monitor their perspective, potential bias, and how it may be influencing the research (Bloomberg & Volpe, 2016; Ravitch & Carl, 2016). Member-checking interviews also took place and were an opportunity for participants to fill in any gaps or clarify any misinterpretations.

### **Dependability**

Dependability refers to how reliable the process and procedures are (Bloomberg & Volpe, 2016). To ensure dependability, explanations of the process and procedures are detailed in this proposal. Using an appropriate research design and method also helps to ensure dependability. The design and method were carefully planned through review of the literature, as well as an in-depth examination of qualitative methods. In addition, consultation with dissertation committee members took place throughout the process.

### **Transferability**

In qualitative research, findings are not expected to generalize (Bloomberg & Volpe, 2016). Instead, transferability refers to how well the study fits with the context and if the information gained can be used (Bloomberg & Volpe, 2016). To help ensure transferability, a thorough explanation of the context, methodology, and design is provided to ensure that appropriate methods are used. While the information gained from this study may not generalize outside the specific population, it may be useful to similar contexts. It is worth mentioning that the population included in this study is rather unique in the sense that local culture in Hawaii consists of many cultures, traditions, and value, and the history of Hawaii adds to its uniqueness.

### **Confirmability**

Confirmability is established through the authenticity of the data in which findings are objective and truthful (Connelly, 2016). To ensure confirmability, researcher bias should be minimized. The self-reflection process of journaling and writing memos helped to me minimize researcher bias. In addition, consultation with the dissertation committee and other researchers helped to ensure that my interpretation and analysis is sound. Member checks also helped to authenticate the findings.

## **Ethical Procedures**

### **Researcher Bias**

The role of the researcher as the instrument can result in potential ethical issues if researchers are not aware of the lens they bring to their study (Chenail, 2011). Researchers bring their lenses, perspectives, thoughts, feelings, and experiences all of

which may influence the interpretation and analysis of data (Ravitch & Carl, 2016; Rubin & Rubin, 2012; Tracy, 2010). In addition, ethical issues may arise during data collection as a result of researcher bias (Ravitch & Carl, 2016). As previously mentioned, in order to minimize researcher bias, journals, memos, and consultation were a regular part of the research process.

### **Confidentiality**

Strategies to protect the confidentiality of participants were in place. Participants were or once have been a student on a school campus and likely knew other students as well as teachers and staff. To protect the confidentiality and privacy of participants, interviews took place in a private room or space. Participants were given pseudo names and their personal information was kept separate from transcripts and recorded interviews in order to separate personal identifiable information from the actual data. All electronic data were secured through encryption and passwords and hard copies were secured behind two locks.

### **Participant Experience**

During the informed consent and introductory phase of the interview, participants were informed that they could cancel the interview at any point to reduce distress and discomfort. None of the participants requested to stop the interview. Interview questions asked participants to share about their prior experiences including emotional and psychological challenges. Sharing such experiences could have brought up difficult emotions and triggers. A debrief sheet (see Appendix D) was provided to participants that recapped what was covered in the interview and shared information on possible

emotional and physical responses. The contact information for a local mental health hotline was also provided should the participants need to speak to a mental health professional as a result of distress related to the interview. None of the participants expressed having an adverse reaction to the interviews or requested to stop the interview as a result of distress. I sincerely thanked each participant at the end of the visit. In return, several participants said that they wanted to be a part of the study so that they could share their story. They shared that it was an opportunity to have a voice and for some, it was the first time they had ever told their story.

### **Summary**

This chapter presented the research design and rationale, the role of the researcher, methodology (instrumentation, procedures for recruitment, participation, and data collection), as well as the data analysis plan, issues with trustworthiness, and ethical procedures and considerations. This study included high school noncompleters in adult remedial education (ABE and HSE) classes who self-reported emotional and psychological barriers. A total of seven participants volunteered and were asked to share about their lived experiences regarding emotional and psychological challenges as well as counseling. Safeguards were in place to ensure confidentiality and the protection of personal identifiable information as well as the well-being of participants during the interviews. The informed consent process and collection of basic demographic information took place prior to the primary interview. Using a hermeneutic phenomenological approach with semistructured interviews took place. The interviews were transcribed verbatim and analyzed for preliminary meaning. Member-checking



interviews took place to clarify information and fill in any gaps. After member-checking interviews were completed and transcribed, secondary meaning units were generated. Individual interviews were analyzed separately and also collectively with the other interviews. Thematic analysis and synthesis took place to arrive at an in-depth understanding of participant experiences. Chapter four will detail the data collection and analysis process as well as present the findings of this study.

## Chapter 4: Results

### Introduction

The purpose of this qualitative hermeneutic phenomenological study was to explore the experiences of adult remedial learners regarding emotional and psychological challenges prior to dropping out and through enrollment in an HSE program. Previous chapters provided an introduction to the study (background, problem statement, purpose, research questions, definitions, etc.), a review of the literature (search strategies, conceptual framework, terms, concepts, etc.), and a discussion of the research methodology (design, rationale, role of the researcher, participant selection, sampling, procedures, data analysis plan and steps, etc.). In this chapter, I describe the setting, demographics, data collection, data analysis, evidence of trustworthiness, and results. Excerpts from interviews provide descriptions of participants' experiences with emotional and psychological challenges, as well as barriers, supports, and counseling prior to dropping out and during participation in an equivalency program.

### Setting

Participants were all students who were enrolled in an adult remedial education class (ABE or HSE) with the CSA. Each interview was scheduled and took place at the site where the participant was enrolled in classes. A private office or classroom was used to conduct the interviews. Interviews were scheduled at a time that was convenient for the participant (prior to class). Although I was familiar with the setting in which the interviews took place, to my knowledge, there were no personal or organizational conditions that might have influenced the participants or their experience at the time of

the study. Some participants shared information about their prior trauma and experiences; however, these experiences are not believed to have influenced the participants at the time of the study.

### **Demographics**

The participants completed a brief demographic survey just prior to the interviews. Participants self-reported their age, gender, ethnicity, city of residence, last grade attended, and estimated income range. Three participants identified as female, and four participants identified as male. Participant ages ranged from 18 to 22 years. Three participants were 18 years of age, three participants were 19 years of age, and one participant was 22 years of age. Five participants reported being of two or more ethnicities. Six participants reported as Native Hawaii Pacific Islander (Hawaiian and Samoan), four reported as Asian (Chinese, Japanese, Filipino, and Vietnamese), two reported as being Portuguese, one reported as being White, and one reported as being Puerto Rican. Five participants reported earning \$9,524 and under, and two participants reported earning \$9,525-\$38,700. Each participant was assigned a pseudonym. Table 1 provides an overview of the information obtained from the demographic survey.

Table 1

*Demographics*

Participant pseudonym	Age	Ethnicity	Gender	Income range	Last grade attended
Nalani	19	Hawaiian Chinese Vietnamese Portuguese	Female	\$9,525-\$38,700	10
Kapena	18	Hawaiian Puerto Rican	Male	\$9,525 and under	11
Pono	19	Samoaan	Male	\$9,525 and under	11
Sean	19	Vietnamese	Male	\$9,525 and under	10
John	18	Hawaiian Japanese White	Male	\$9,525 and under	11
Stephanie	22	Hawaiian	Female	\$9,525-\$38,700	11
Kathy	18	Hawaiian Samoaan Filipino Portuguese	Female	\$9,525 and under	11

**Data Collection**

A total of seven participants volunteered and participated in the study.

Recruitment took place over a 7-month period, at which point saturation was reached.

Each participant was asked and consented to participate in a primary in-person interview and a follow-up member-checking interview. The primary interview took place in person at the site where the participant was taking HSE classes. The follow-up interview took place over the phone or in person. In-person follow-up interviews were scheduled for

participants who did not have convenient access to a telephone. The primary interviews ranged from 20 to 65 minutes. The follow-up interviews ranged from 11 to 30 minutes. The interviews were recorded on a recording device that was password protected. Participants clipped on a lavalier microphone that was connected to the recording device. For the primary interview, a backup audio recording device was used. Journals were written after each interview to note any reactions and thoughts I had during the interview.

All primary interviews followed a semistructured interview format (see Appendix A). Open-ended questions, paraphrasing, reflections, and summaries were used during the interviews to engage participants and draw out more in-depth meaning of their experiences. Interviews were transcribed verbatim. They were stored on a password-protected external hard drive. Follow-up and probing questions were asked throughout the interviews to obtain clarification and more in-depth information. For example, some participants mentioned having anxiety. To better understand their experience of anxiety, I asked questions such as “What was that experience like?” or “What did that feel like?”

After the first three interviews, several trends began to emerge. For example, the first few participants mentioned living in poverty, an experience of falling from grace, and not having any options. By the fourth participant, bullying had also become a theme. Follow-up and clarifying questions regarding these trends were asked for subsequent participants in order to determine whether these experiences were shared among the remaining participants. Follow-up interviews were an opportunity for member-checking

to ask clarifying and follow-up questions, and to give participants an opportunity to add or correct information. Follow-up interviews were also transcribed and coded.

### **Data Analysis**

My first step was to conduct and record the interviews. After each interview, I transcribed it verbatim, including slang and breaks in speech. Bloomberg and Volpe (2016) recommended transcribing interviews as soon as possible. I analyzed each transcript and created descriptive codes, which were words or phrases that represented key points or ideas (Saldana, 2016). First-round coding generated preliminary meaning units. Meaning units are used in phenomenological studies. They are descriptions that are generated by identifying themes and patterns of a phenomenon (Bloomberg & Volpe, 2016). After first-round codes were generated, I identified areas of gaps and conducted follow-up member-checking interviews. Member-checking interviews offered a way for participants to clarify, correct, or add new information (Maxwell, 2013). Follow-up interviews were also coded, and codes from follow-up interviews were used to make meaning of first-round codes. Bloomberg and Volpe stated that second-round coding and analysis can yield new meanings and patterns that were not quite evident in first-round analysis. For example, a first-round code, *Cornered*, was established for Nalani. After the follow-up interview and checking for understanding, the secondary code of *No options* was established. Nalani clarified that she felt that it was not so much that she was cornered, and more that she felt that she did not have any options.

Managing and keeping track of data was a very important part of this study. Bloomberg and Volpe (2016) contended that having a clear and organized system for

managing data is important at every part of the research process. To organize my data, I used tables and spreadsheets. Each interview was transcribed verbatim by typing the interview into a table with one column for the dialogue, one for codes, and one for notes. Codes were written into the column for codes. Notes and memos were taken throughout the coding process to record and track data collection and analysis. Primary and secondary codes from each interview, as well as the quotes used to generate the codes, were copied and pasted into a spreadsheet. A separate sheet of codes and quotes was created for each participant. Primary and secondary codes were also collected for all participants and transferred to a single spreadsheet for comparison and analysis across all participants. Codes for all participants were also pasted into another spreadsheet so that I could review all of the codes and identify patterns and themes related to participant experiences and the interview questions. Overall, a total of four types of spreadsheets were created: (a) individual spreadsheets for participant transcripts with codes and notes, (b) individual spreadsheets with codes and quotes for each interview question, (c) a compiled spreadsheet with primary and secondary codes for all participants for each interview question, and (d) a compiled spreadsheet of all secondary codes.

Data were analyzed using the hermeneutic circle. This method of analysis moves from parts of the data in relation to the data as a whole to arrive at an in-depth understanding through interpretation of the data (Boell & Cecez-Kecmanovic, 2010; Sloan & Bowe, 2014). Gadamer (1989) described analysis as a spiral process that moves back and forth from parts to the whole. Meaning is made both individually (separate interviews and transcripts) and collectively (all interviews and transcripts). My

understanding was developed and revised through the hermeneutic circle. First, I moved from each individual code by examining the quote and transcript from which the code was derived. I then examined the code as it related to the other transcripts, quotes, and codes for the participant as well as other participants. I then synthesized the codes for each participant and reviewed the quotes from all transcripts to develop themes. From themes, I developed a more in-depth understanding of how individual codes related to patterns and experiences across all participants. For example, the code *Major Life Event* was derived from individual participant experiences such as (a) a death of a significant person, (b) the loss of a significant relationship, and (c) escalated turmoil with a guardian. The code *Major Life Event* was included in the theme *External Adversity*, which described circumstances that were beyond the participants' control.

My fore-conception, or preconceived knowledge, influenced the selection of words used for codes. First-round codes were words directly from the quotes and might have been unique to each participant. After further analysis, second-round codes were used to develop secondary codes. Secondary codes synthesized participant experiences into a word or short phrase and encapsulated experiences across participants. My fore-conception influenced the words selected for secondary codes. For example, my understanding, from my perspective as a counselor, doctoral student, and educator, was used to select the term *self-efficacy* as a secondary code for participant experiences, which related to their thoughts and beliefs about themselves and their abilities. Participants shared that they doubted their abilities and that they thought that they were not able to reach achievement. They did not use the term *self-efficacy*. My



understanding of self-efficacy and interpretation of participant experiences was used to arrive at a meaning of participants' lived experiences. In this example, their doubt in their abilities meant that they experienced low self-efficacy, which was part of the overarching theme and experience of *Psychological Struggle*.

### **Discrepant Cases**

Discrepant cases are to be expected, as each participant's experiences are unique. Initially, there were a few discrepant cases that emerged; however, after reviewing the data in their entirety, the majority of those cases were merged with overarching themes. For example, only one participant experienced pregnancy, which resulted in her dropping out. This was later coded as *Major Life Event*, which was used to code life events that led up to the participant dropping out of high school. To illustrate another discrepant case example, there was also only one participant who grew up in the continental United States and spent time as a runaway, who moved from state to state. Initially, this was a discrepant case; however, after a review of the data in their entirety, it was coded as *Inconsistent/Unstable Home Life*, which was defined as a lack of structure and stability at home. Other participants' experiences also included frequent and multiple moves and a lack of consistency at home. These experiences, while unique to the participants, became a common theme across participant experiences. Another participant shared her desire to attend school because it was an escape from her challenging home life. Initially, this was coded as *School as an Escape*; however, only two of the seven participants shared this experience. For both participants, their participation in an HSE program was a positive experience, in part because it was an escape from challenges outside school. These

experiences were merged under the code *Positive HSE Experience*, which was experienced by other participants.

### **Evidence of Trustworthiness**

In order to ensure trustworthiness, researchers can implement methods and strategies to improve the strength and quality of research (Ravitch & Carl, 2016). One such way is to increase credibility and confirmability through journaling, note taking, and memoing (Bloomberg & Volpe, 2016; Ravitch & Carl, 2016). I kept journals and wrote memos throughout the data collection and analysis process. After each interview, I wrote a journal to note my reactions, thoughts, and feelings in order to monitor my bias and process as a researcher. For example, Stephanie mentioned in her interview that she had experienced a traumatic accident, but she did not feel that the accident or experience had any connection to her panic attacks and anxiety. During the interview, I noticed myself asking probing questions that dug deeper into her experience and the events of the accident. In my journal, I noted that my questioning was a result of my experiences as a counselor, rather than as a researcher. This was an area in which I might have explored in my role as a professional counselor. As a researcher, it was necessary that I make meaning of the participant's experience, and her perspective was that the accident and that experience was not connected to the panic attack and anxiety she experienced while attending HSE classes. In analyzing the data, I could only use the data in front of me: I could not make inferences about Stephanie's experience based on my prior experience with working with clients who had experienced trauma.

Member-checking interviews were also conducted to help ensure that the initial analysis was accurate and to give participants an opportunity to add or clarify information. Member-checking interviews are a way to confirm and modify data (Birt et al., 2016). During member-checking interviews, I summarized the information obtained and asked additional questions for clarification to confirm or correct first-round codes. I also offered participants an opportunity to share or correct information.

### **Results**

In total, 37 codes were arrived upon after review of first-round and secondary codes as well as a review of individual transcripts and data parts in relation to all of the transcripts and data. First-round coding yielded preliminary codes that were generated for each individual transcript. There was an average of 86 initial codes across all participants during the first round. These codes were analyzed and combined based on the trend. For example, all participants expressed having experienced having difficulty with emotions. These emotions included *Anger*, *Frustration*, *Depression*, *Sadness*, *Loneliness*, and others. Each of these emotions was a separate preliminary code. The individual emotion codes (mentioned above) were combined, and the secondary code of *Difficult Emotions* was given. The frequency of secondary codes among all participants helped in identifying trends (see Table 2).

Table 2

*Frequency Codes*

Code	P1 Nalani	P2 Kapena	P3 Pono	P4 Sean	P5 John	P6 Stephanie	P7 Kathy
Academic Problems		X	X	X	X	X	X
Counseling Beneficial	X	X	X	X	X	X	X
Counselor Match	X		X	X	X	X	
Counselor Actions (School)	X	X				X	X
Counseling Unutilized	X	X	X	X			
Counseling Utilized					X	X	X
Difficult Emotions	X	X	X	X	X	X	X
Difficult Thoughts	X			X	X		X
Drugs		X	X	X		X	X
Fall From Grace	X	X					X
Feeling Alone		X	X	X			X
Forced Adulthood		X	X		X	X	X
Home Life Challenges	X	X	X	X	X	X	X
HSE—Hope and Optimism		X			X		X
HSE—Improved Self-Efficacy	X		X	X			X
Lack of Stability	X	X	X	X		X	X
Lack of Support	X	X	X	X			
Low Self-Efficacy	X	X	X	X	X	X	X
Major Life Event	X	X	X	X	X	X	X
Motivation	X	X	X		X	X	X
Negative Mindset Shift	X	X	X	X	X	X	X
No Options	X	X	X			X	X
Poor Coping Skills		X	X		X	X	X
Poor School Attitude	X	X		X		X	X
Positive Coping Skills			X		X	X	X
Previous Positive School Experiences			X	X		X	X
Positive HSE Experience	X	X	X		X	X	X
Positive Mindset Shift	X	X	X	X	X	X	X
Positive Social Interactions		X	X	X	X	X	
Positive Support					X	X	X
Poverty	X		X			X	X
Regret		X			X	X	
Resilience	X	X	X	X	X	X	X
Social Challenges	X	X	X	X	X	X	X
Spirituality		X		X		X	X
Trouble	X	X	X	X	X	X	X

After reviewing each transcript and the codes for the individual interview, I analyzed the codes derived from the other interviews and transcripts. I then synthesized the codes based on trends in order to arrive at more a in-depth understanding as a whole. Similar content and codes were synthesized, and final codes were determined (see Table 3). For example, some first-round codes for participants included *Fights*, *Academic Suspension*, and *Arrested*, which were synthesized into the single code *Trouble*. Content that frequently appeared across participants were determined as significant. Each of the codes, as well as the excerpts and notes for each code, were reviewed until patterns and categories were uncovered.

Themes were derived from analyzing the codes and identifying trends and commonalities (see Table 3). For example, the codes of *Forced Adulthood*, *Major Life Events*, *Poverty*, *No Options*, and *Lack of Stability* were given to individual participant experiences. Each code represented adversity experienced by participants as a result of situations and circumstances that were out of their control. The trend was that participants experienced some sort of external adversity (adversity that was out of their control), therefore the final theme of *External Adversity* was given. Another example is the theme *Interpersonal Struggle*. This theme is comprised of codes used to for struggles participants had with others (*Home Life Challenges*, *Lack of Support*, and *Social Challenges*).

Table 3

*Themes*

Final themes	Codes			
External Adversity	Forced Adulthood	Major Life Events	Poverty	Lack of Stability
Interpersonal Struggle	Home Life Challenges	Lack of Support	Social Challenges	
Emotional Struggle	Difficult Emotions	Regret	Feeling Alone	
Psychological Struggle	Difficult Thoughts No Options	Negative Mindset Shift	Fall From Grace	Low Self-Efficacy
Maladaptive Behaviors	Trouble	Drugs	Poor Coping Skills	
School Struggles	Academic Problems	Poor School Attitude		
HSE Is Positive	Positive HSE Experience	HSE—Hope and Optimism	Motivation	HSE—Improved Self-Efficacy
External Protective Factors	Positive Support	Previous Positive School Experiences	Positive Social Interactions	
Internal Protective Factors	Resilience	Positive Mind Shift	Positive Coping Skills	Spirituality
Counseling is Positive	Counseling Beneficial	Counseling Utilized		
Counseling Limitations	Counseling Unutilized	Counselor Actions (School)	Counselor Match	

## Theme Descriptions

**External Adversity.** The theme of *External Adversity* was given to describe adversity that was beyond the participants' control. As listed on Table 3, the codes for this theme are *Forced Adulthood*, *Major Life Events*, *Poverty*, *No Options*, and *Lack of Stability*. For each participant, the meaning was slightly different. For some, *External Adversity* meant that they lived in poverty, and for others there was a lack of stability. However, for all participants, *External Adversity* was experienced prior to them dropping out of high school and, to a certain degree, after they enrolled in an adult remedial education. Adversity that was experienced prior to them dropping out of high school contributed to their early departure from high school and poor academic performance.

*Forced Adulthood* refers to adult choices and actions participants engaged in despite being a child or adolescent. Five of the seven participants experienced forced adulthood. Kapena shared that he was kicked out of his foster parent's home abruptly and was forced to live on his own and make his own living despite being unprepared and a minor. Sean also shared that he was forced into adulthood as a runaway where he needed to make a living, find shelter, as well as clothe and feed himself. Stephanie shared that she got pregnant in high school while she was a minor and was thrust into motherhood and adulthood. From there, she dropped out of high school so that she could meet the duties of motherhood. Nalani also was forced into adulthood and shared that she needed to help support her family financially by getting a job. Kathy also shared that from a young age, she had to be an adult. She stated, "I am the oldest, so I had to stay back and watch kids and my siblings so I was barely in school and I think that is also

what held me back from learning.” She also talked about needing to go home right after school to clean, cook, and take care of her siblings. She said, “I would go home, rush, and do something like clean my kitchen, and then cook something, and then make sure [my siblings] shower[ed].” Kathy also shared about her frustration with watching her siblings. Additionally, she also had to watch over her mother. She said, “It is just frustrating, and then [in] elementary, I was hardly in school because I was watching my mom. She was on drugs and stuff so she was barely home. She went out and came back home at night.” For Kathy, there was a lot of pressure and responsibility. She said, “I just had so much weight on my shoulders.”

*Major Life Events* resulted in turning points in participants’ lives. All seven participants had a major life event that was the start of their downward spiral. For some participants, there were multiple events which resulted in a further downward spiral. Kathy and Sean, both found out their father was not their biological father in an abrupt and unsupportive way. Kathy said that when she was younger, she lived with who she thought was her father, only to find out later that it was her step-father that she was living with. Her step-father did not know that she was not his real daughter and a paternity test was done. When talking about her experiences she said:

When I was around five or six, I found out who my real dad was. So, I [moved] because my mom wanted me [to move]. They flew me down [to Hawaii]. At six, that is when my whole life [changed], and I just, I do not know, I never really had a childhood, so it was really hard.



When Kathy was in intermediate, she was also removed from her mother and biological father as a result of severe physical and emotional abuse. Kapena, Kathy, Pono, John, and Sean experienced distressing relationship deterioration with significant individuals in their lives at the time. Stephanie was in a severe automobile accident which resulted in the death of a peer. Nalani experienced bullying as well as feeling that she was targeted by school staff. Pono and John shared about the death of a family member that they were really close to. When talking about his loss, Pono shared, “Everything went downhill for me when, my grandpa passed.”

*Poverty* was another common code. All participants reported being in one of the lowest two income bracket on the demographic survey at the time of the interviews. Additionally, Nalani, Pono, Stephanie, and Kathy all expressed being poor while they were in primary and secondary school. Nalani described her experiences as “...just surviving and at that point going to school is a luxury.” When talking about her financial situation when she was growing up, she shared that “It was hard to just provide for one of us in the first place.” For Nalani, she needed to get a job to support herself and her family, and that responsibility took away from her academics. She shared that “Not everybody can afford to go to school” and that her family was “...very poor, so...the adults in [the] family did not go to school.” Stephanie shared that her father’s drug use had an impact on her family’s financial situation. She said, “Being around drugs, I guess [it] affects income wise so we couldn’t get everything we wanted...It was like, oh no, we need this, we need [things] so you can not have what you want.”

*Lack of Stability* was experienced by six participants. This code referred to a lack of consistency in their home and school life. Nalani, Kapena, Pono, Sean, Stephanie, and Kathy all shared that they had to move throughout their primary and secondary school years. For some participants, the lack of consistency and stable home life was more challenging than for others. Kapena and Sean shared that they moved and lived with several different family members or other families. Sean moved across many different states. Kathy and Pono also shared that they moved states at least once while they were in school. Even while living in Hawaii for consistent years, participants reported moving schools several times. Kathy said, “I moved, I went to a lot of [elementary schools]” and “I moved every year, so I did not really get close to staff and others.” When he talked about moving schools, Pono shared that he “...did not want to be there” because he “was not comfortable.” When asked if his discomfort had to do with being in a new school, he agreed and said, “Yeah, actually, yeah.” Pono shared that he went to several different high schools. He said, “I went to like five schools, high schools, like basically every high school I went was only for one quarter, then I left.” For the participants, the lack of stability at home resulted in a lack of stability in school which contributed to their declining academic performance.

**Interpersonal Struggles.** Participants described experiences surrounding struggles with others in their lives. All seven participants reported having some degree of social and home life challenges, and five of the seven participants shared that there was a lack of support during their lives. Codes for this theme include *Home Life Challenges*, *Lack of Support*, and *Social challenges*.

All participants shared about *Home Life Challenges* that included conflict with parents, lack of parental guidance and positive attention, violence and aggression with or from parents, communication problems, an unstable home life, emotional and psychological abuse, living in foster care, parental mental illness and substance abuse, and parental incarceration. Kathy shared that she was abused emotionally and psychologically by her mother. When talking about her mother, Kathy said, “She abused me my whole life, she treated me like complete \*\*\*\*” and “She told me that...if I were to tell that my mom hit me, then they would take me, CPS would take me away and they would lock me up in the closet and not feed me.” Kathy also said, “My mom tried to drop me off at the police station so many times, like on the side of the road. She did not even want me...There was no love from her. She was the biggest bully in my life.” Sean shared that he did not feel connected to his parents. He said, “I would never get attention, so I would always act out,” “With my mom...we do not really have a connection” and “I did not really have parents that [were] parents. [They weren’t] what I think parents are supposed to be.” When talking about his father, he said, “...with my dad also, you know, no communication, I just felt like there was no bond between any of my family members. I felt like I was an outcast.” For Sean, after the deterioration of the relationship with his biological father and mother, he wandered looking for someone to connect with. As a result, he latched on to peers and intimate relationships which were tumultuous. Kapena also shared that he felt that there was no real connection with his guardian who he felt did not really care about him. He said, “I am trying to open up to [her] and [she is] over there [being] fake.” Pono also shared that he did not feel cared for by his guardians. He said,

“Growing up, they never did show love to me because I was a knuckle head. To me, I did not feel like they [showed] me the love that they showed my siblings.” Kathy, Stephanie, and Kapena shared about a parent incarceration. Stephanie said, “...he actually went into jail and he, he has been in there for a while. Then he was in a program for like two years. He has just been away a lot.” Kathy, Stephanie, Kapena, and Sean shared about their parent’s drug use. Kapena said, “My dad was a drug dealer, my mom was the same.” Nalani and John shared that mental illness was present in their family. John said, “That is how he is, he is kind of bipolar...we know he is bipolar.” Nalani shared about how anxiety was prevalent in her home. She shared, “We never used to leave the house...all the girls had anxiety.”

*Lack of Support* was also experienced by participants. Four of the seven participants expressed having a lack of support. Participants shared that they did not feel they had much support. As a result, they had to be independent and do things on their own. Pono said, “I didn’t really have [anybody] so I was just on my own.” Kapena shared that as he got older, his guardian became less and less supportive. He said, “she kept telling me, I hope you know once you are 18 you are moving out.” He expressed sadness and frustration because he knew at 18 he would have still been in high school so it would be hard for him to be on his own and still attending high school. Nalani shared that she did not feel supported and felt that she only had herself to rely on. She said, “I feel not really supported in anything that I do. I feel like it is generally up to me.”

*Social Challenges* were also experienced by all participants. These challenges included being bullied, being targeted by students and school staff, feeling outcast,

having poor social connections and social anxiety, getting involved with poor peer influences, having relationship issues, and feeling alone and disconnected from others. Six of the seven participants shared that they were bullied. Sean said "...during middle school, I was that nerdy type...and people would always pick on me." Nalani said, "There were times I would [get] bullied," "...they would try to like beat me up, but I knew how to fight back." John shared that he "never really had friends" and that he "got bullied." He said, "I was like the smallest one in my class and they always pick on the smallest people." Pono also shared that he was the "little kid that everyone picks on." Some participants had a hard time connecting with others. Pono shared, "I do not like being in groups. I rather just do it on my own, like, be on my own [and] just do it by myself." Kathy shared that when she was in elementary, she had a difficult time making friends. She said, "I did not care if I had a friend or not. All I cared about was when I [got] home, what is going to happen to me? I was just scared." She also said, "All I thought about was what is going to happen when I get home...I did not really think about having a friend or [anything] like that." Kathy started attending school regularly once she was put in foster care, and as a result, she was around her peers more. She was able to develop friendships while she was in intermediate, however, she said that "...freshman and sophomore year, I had friends, but then, every friend I had ended up being fake, so I would lose friends. I had one best friend, but then she just changed fully." Stephanie shared that she got bullied toward the end of elementary school. She said, "In elementary, toward the ending, I got bullied." She shared that after she was bullied, she did not like school anymore. She shared that after repetitive bullying, she stood up for

herself. She said, “She kept picking on me, so I hit her... and that did not work out. I ended up moving schools after that.” She also shared about her experiences with “high school drama” after she dropped out. She said, “People would just bring up things from high school and just wanted to fight with me over that.” Kapena and Kathy both shared that peer influences resulted in a change in mindset and drug use. Kathy said that after she was put into foster care she attended school consistently, and as a result, she made friends. She said, “I met new people and they were smokers” and “...we would get high all the time and I would skip class.” Kapena talked about, “...drugs, and hanging out with the wrong people, that did the same thing.” John also said he was “hanging out with the wrong people.” For participants, poor peer influences took them down the wrong path and led to their academic decline.

**Emotional Struggle.** All seven participants experienced difficult emotions, such as anxiety, frustration, regret, and anger. Five participants shared about poor coping skills to deal with their struggles and challenges. Four participants shared that they felt alone, and all seven participants shared that they felt like they were not capable of achievement or success. The codes for this theme are *Difficult Emotions*, *Regret*, and *Feeling Alone*.

Participants experienced *Difficult Emotions*. Nalani shared that she felt anxiety prior to dropping out and while enrolled in an HSE program. She said, “...I would have anxiety that I would never finish school.” She talked about having “physical symptoms of anxiety, like nausea and lightheadedness...[and] butterflies in your stomach which make you vomit.” For Nalani and Stephanie, anxiety was a major barrier to their

academic success. Stephanie said, “I feel like what’s preventing me is my anxiety.” She attempted to earn her HSE several times. She said, “The second time [I returned to HSE]...I ended up getting anxiety,” “...I was like, okay, I am actually going to try and finish it this time, but the anxiety happened, so I am, okay, that is something stopping me now.” She also said “I am just like, now I can’t get my diploma, I can’t go to work, I can’t do [anything], so I [told] my mom, “how am I going to get money for my kids?” You know?” Kathy also shared that she struggled with feelings toward her mother because of her mother’s abuse. She said, “I have been struggling with trying to forgive my mother....She treated me [horribly]. I never really wanted to live.” Kathy said that she also struggled with anxiety and fear prior to enrolling in an HSE program and also at the beginning of her enrollment. She said, “I would have panic attacks.” Some of her difficult emotions surfaced in the school setting. She said that she would be “really scared” to speak in front of class, and also to go home. She also said, “I just have my mental breakdowns. I got sad and stuff, and out of nowhere I would get sad and I would cry. I would just cry, and then it is hard for me to stop crying. I just keep crying.” While anxiety was present mostly in the female participants, the male participants expressed having challenges with their anger. Pono shared that he experienced anger. He said, “I was letting my anger out on everybody.” He shared that he experienced anger while in an HSE program and said, “I have been trying to cool down lately, but there are some things that trigger me.” John shared that he felt doubtful and depressed prior to dropping out and when he first entered an HSE program. He also shared that he felt angry, upset, irritated and depressed at times.

*Regret* was also an emotional struggle for John, Kapena, and Stephanie.

Participants shared that even though they accepted and embraced their challenges, they wished their lives would have been on a different trajectory. On numerous occasions during the interview, Kapena shared that he “wished he stayed in school” and “I honestly wish I were still in regular school.” John shared that felt regret about his choices and actions which resulted in loss of trust and failure in school.

Participants also felt difficult emotions as a result of what happened in their lives outside of school. Throughout his life, Sean shared that he struggled with feeling angry, misunderstood, lost, and alone. He said, “I [was] always angry because I could not [communicate] the way I wanted.” He also shared, “I have always felt misunderstood...I just felt mostly lost [with] no sense of direction.” Sean shared that he “...would get angry with certain things” and then isolate himself. Sean also shared that he felt “depression and anxiety” and had suicidal ideations in the past. Kathy held in a lot of anger and resentment toward her mother. She said, “I am trying [to] forgive her. I am like, I am old already so it does not matter, but then, it still hurts.”

Participants also shared that they *Feeling Alone* and isolated. Kapena, Sean, Pono, and Kathy talked about their loneliness. Sean said, “I have always felt alone, and just the journey that I went through, feeling that way all the time.” Kathy shared she felt she was on the journey alone and when asked about that she said, “I could not really share with anybody what was going on.” She shared that she struggled to make friends, and when she finally did, that relationship deteriorated. She said, “Once I lost my best friend, once I cut her off, I just felt alone.” Sean shared that he felt he was on his own.



He said, “I guess I felt like I did everything on my own... I moved around on my own and did things on my own.” Sean also talked about feeling alone and not having any support. For him, this loneliness was difficult, but he also found it a part of his identity. He said, “I guess I was always independent and then you know, I felt a sense of pride when [I] do things independently.” Kathy shared a similar experience in which she was so used to not being able to turn to anyone, that feeling alone and being alone became part of her identity. She said he felt “empty” and said, I just feel alone.” Kapena also felt he was alone. He said, “I was on my own, living on my own that is why I basically just did everything on my own.” Lastly, Pono said, “I did not really have [anybody]. I was just kind of on my own.”

**Psychological Struggle.** All seven participants experienced psychological struggle prior to dropping out and at some point during enrollment in an HSE program. Some of the psychological struggles they experienced were coded as *Negative Mindset Shift*, *Difficult Thoughts*, *Low Self-Efficacy*, *a Fall From Grace*, and having *No Options*. According to participants, these struggles contributed to their early departure from high school and early struggles in an HSE program.

A *Negative Mindset Shift* was experienced by all seven participants prior to dropping out of high school. One participant experienced a negative mindset shift while they were enrolled in an HSE class. Participants shared that they stopped caring about school and about their success. John said that he experienced a negative shift in his mindset. He said, “I [did not] really care about school. I never cared about my grades, and I did not really care about getting my diploma at first, so I [was always] ditching

class and not going to school at all.” John said, “Once my sophomore year came, that is when I started getting into a lot of trouble...that is when it started to change.” He shared that he lost his motivation and began to be interested in other things that were bad influences. Sean shared that he began to feel differently about attending school and as a result he “did not do anything.” He said, “I did not go to class, I would just do whatever would make me feel good, and I would have fun instead of focusing on my priorities.” His path and attention shifted to romantic relationships and superficial friendships, which eventually led him to experiencing the world by wandering across states and bouncing from home to home. He said, “I just roamed around hanging around with people who did not go to school. I just hung around with them doing whatever they were doing.” He also said, “We travelled on our own through the different states...I would wander the streets just kind of [on] my own adventure.” For Kapena, the mindset shift came as a result of drug use. He said, “I was in an [advanced class] but then I started smoking and that is what took me down...My whole feeling [and perspective] toward school just changed and then everything just flipped...and I just started to not give a \*\*\*\*.” Kathy shared a similar experience to Kapena. She said, “My sophomore year, I was good, then when it came to junior year, that is when I went downhill.” Kathy also shared, “...I would skip class and then, the beginning of senior year, that is when I [did not go] to class at all, I was smoking every second of the day.” Her downward spiral began with her loss of friendships. She said:

I was depressed...I just stopped caring...I did not care about anything and I hung out with girls that skipped class because I would skip class myself and then I

would see these girls skipping class and we would hang out. They would [smoke marijuana] so I got more into that, and then I stopped going to school.

*Difficult Thoughts* were experienced by four of the seven participants. These thoughts included thinking that they were never going to finish school, that it was too difficult, and that school did not matter. Nalani talked about dreading going back to school to earn her equivalency. She said, “[I was] dreading it so bad. I do not know why I have to do this, I know I have to do this, but I really do not want to do this.” She said she was apprehensive because she thought that others were going to be ahead of her and that she was not capable. She said, “I figured that other people would be going to night school because they just dropped out of school and they were just going to refresh...while I have not even studied...and I am literally going in there blind.” After her anxiety attack, Stephanie talked about thinking that she was not capable and that she was not going to be able to successfully attend school, get a job, or be around people. She said:

Going to school, I needed to be around people. I just felt like, okay, I cannot do it. There is going to be a lot of people there. Trying to get a job, okay, I cannot do it. I thought I could not do any of those things because my anxiety was holding me back from all of that.

All participants shared that they also doubted their abilities. The code *Low Self-Efficacy* was used for instances in which participants shared doubt about their ability to succeed or perform. Kathy shared that she felt that she did not think she could complete an HSE program. She said, “I do not think I am going to pass.” Nalani shared that she

was worried to enroll in an HSE program because she “did not want to be around other people being the [most stupid] person in class.” She said, “I felt stupid, and I was like, oh my gosh, everybody is going to know all this stuff.” Prior to dropping out and during initial enrollment in an HSE program, Kathy shared that she did not feel she knew math. She said, “I do not really know much, like with math, I have a hard time.” Kathy said that she felt “really dumb. She said, “I broke down because I was disappointed in myself.” During high school, John talked about doubting himself and losing confidence for not standing up for himself and being assertive. He said, “I did not have the confidence to stand up for myself” and “I feel [doubtful] and depressed.” Kapena shared that before he dropped out of high school, he began to fail his classes he felt poorly about himself and his abilities. He said, “I am failing all my stuff, I am getting all these failing grades and it starts to make me feel bad about myself.” Pono shared that when he was in high school, he thought he was not capable of doing work that was hard for him. As a result, he avoided certain subjects.

*A Fall From Grace* was a common code amongst participants. Several participants shared that they felt a sense of falling from grace and that they let others down. They shared that they were successful at one point but started to decline in their academics. Kapena said that he felt “really [terrible], because everybody knew me [as] that sports kid that is smart and then all of a sudden, I just was known as that pot head.” He also said, “I actually had a good reputation, [but] I stopped playing football, and my grades just dropped, and I was just known as that, that kid that just comes to school high.” He also shared that he received awards and recognitions prior to his downward

slide. He said, “I got a lot of awards, like Principal’s list and perfect attendance, and all of a sudden, I just dropped. None of those came in after a while. I just went downhill.” Kathy also shared that she felt disappointed in herself and scared to let her family down. She said, “...everyone was talking about graduation, like with my family and stuff, and it just hit me like, oh my gosh...I do not even know if I am going to graduate.” She shared that she was afraid to let her family down because she was not going to graduate. John shared that his sophomore year is when he “started to go downhill.”

Participants shared that they thought they had *No Options*. Five of the seven participants shared that at some point, they thought they were stuck with no way out. For participants, this was the breaking point for them that forced them into an HSE program. However, in that moment of having *No Options*, it was a cause of distress. Kapena talked about turning 18 and realizing that he needed to get his life together or things would get worse for him. He said that he felt like it was his “last chance” because he was 18. For Stephanie, she did not have options because she was a mother. She shared that she needed to care for her child, so she had limited options. As time passed, she tried to complete her HSE, however, did not have transportation or a babysitter, so she had to drop out of her HSE classes.

**Maladaptive Behaviors.** Participants engaged in maladaptive behaviors and actions which prevented them from effectively adjusting to situations, circumstances, and environments. These maladaptive behaviors include *Trouble, Drugs, and Poor Coping Skills*.

All seven participants talked about getting into a degree of *Trouble* prior to and after dropping out of high school, but before they enrolled in an HSE program. This *Trouble* included school disciplinary issues as well as trouble with the law. Examples of *Trouble* included fights, suspension, being arrested, going to jail, and harassment. Nalani shared that "...a lot of trouble would just come my way.... [it] gravitated toward me." John shared that "My sophomore year came, that is when I started getting into a lot of trouble." Kapena stated, "I was getting in trouble. I got arrested a couple of times...[for] robbing and stuff like that." Pono talked about getting into a really bad fight. He said, "I hurt someone really bad, and...I got locked up for that." Stephanie mentioned that she had some traffic violations and had some trouble with the law for not appearing to court. For participants, their *Trouble* came as a result of behaviors and actions in which they engaged in to avoid or cope with situations, circumstances, or their environment.

Five of the seven participants mentioned using *Drugs*. This usage resulted in trouble for the participant and a decline in school performance. Drug usage was described as a way to "numb" from pain and hardship that the participants experienced. Kapena and Kathy also shared that they used drugs to cope. Kathy described her childhood as being abused and mistreated. For her, using drugs, specifically marijuana, was a way to detach from the trauma she experienced. Kathy said, "I would literally wake up early and get ready just to go pick up [marijuana], and then we would smoke." She also shared, "...when I am sober, I just feel irritated and sad and mad and angry," "...smoking [marijuana] was really numbing... to just escape." She shared, "I like the numbness." Kapena said, "When I got into an argument with [my foster mom] I would

call my friend to pick me up...and asked to smoke.” Kapena also mentioned that “the drugs just made me not care.” He said, “I totally went down hill when I was smoking...like dramatically,” “After I was doing [marijuana], I just did more and then I was getting into big trouble...I got arrested for robbery and stuff like that.” Sean described his drug use as a way to “numb” himself from his difficult experiences. For him, it got to the point where he overdosed and was hospitalized. Sean shared, “I felt like I did not have a reason for living, so I just did whatever and then one day, a stranger offered me meth...then I ended up in the hospital.” This was a brief wake up moment for him.

*Poor Coping Skills* was shared by five of the seven participants. As mentioned above, drug use was a way for participants to cope, however, there were also other negative ways in which participants coped. Both Pono and Nalani shared about avoiding situations. Sean sought relationships to fill the “void.” He said, “I just hung around with the wrong crowds just to do whatever... just try to do whatever makes me feel better.” Pono avoided difficult subjects and situations. Kapena and Kathy also shared about shutting others out. Kathy said, “I did not really talk about my problems...I am just so use to keeping all my feelings to myself and not saying anything about anything. I just keep to myself.” She also said that she puts on a front to ignore and not cause attention to her hurt. She said, ...”even though I am going through stuff, I do not make myself look like I am like, you know, really hurt.” Sean shared that he questioned reality and wondered why things happened to him. He said, “I would always question a lot of things and wonder why things are the way they are and things you end up going through.”

Participants also shared that they coped with difficult emotions in maladaptive ways. Pono shared that he got into fights with others when he was angry. Sean and Kathy shared that they did not want to open up to others and remained quiet about their struggles and experiences, thus they bottled up their emotions. Kathy shared that she does not open up to others as a result of having to keep her abuse a secret out of fear of retaliation. She said, “when I am sad, I just do not want to talk to anybody” and “I am so used to keeping my feelings to myself and hiding my sadness.”

**School Struggle.** Participants shared about struggles they had in school. These struggles included academic struggles as well as having a poor attitude about school. While most of the school struggles occurred prior to dropping out of high school. Some participants shared about struggles they had while enrolled in an HSE program. The codes for this theme are *Academic Problems* and *Poor School Attitude*.

*Academic Problems* were experienced by participants by six of seven participants. Stephanie shared that when she went to school, she attended just to be there. She said, “I did not really pay attention. It was like I just went to be there.” Stephanie had a baby her junior year and could not go to school. She said, “In my 11<sup>th</sup> grade year, I actually had the baby, so I had to stay home pretty much could not really go to school as much,” “...by the time I got to 12<sup>th</sup> grade, I was just not going to be able to make up all those credits, so I dropped out.” Kathy said that she struggled in school prior to dropping out. She said, “I would try to attempt to do it the way I thought it must be done, but when I got the answer wrong, oh, I would get so frustrated.” She shared that her academic problems came from poor attendance. She said, “...elementary and intermediate, I hardly



went to school.” Kathy shared, “I [did not] really know anything because I missed class and when I am in class it is just like I do not want to learn.” For Kathy, her absence resulted in being academically behind. She said, “I missed a lot and I just did not learn it and they expected us to know it already.” Attendance was also a problem for Kapena, Sean, Stephanie, Pono, and John. John said, “I actually failed because I never went to school at all.” Pono shared that he did not feel comfortable in school. He said, “I just did not want to be there...I just was not comfortable.” He said that the work was hard and that he avoided the classes he struggled in. He said, “certain subjects...if that class comes up, I would not want to go because it was kind of confusing...It is really hard for me to get through.” Pono also said, “if I know that is something that I can not do...then I am not going to want to do it.”

Nalani and John experienced academic struggles while in an HSE program. John said, “It gets overwhelming for students, and like for me, it really does because there is so much work in a little time.” Nalani and Stephanie experienced setbacks and, as a result, they were not able to finish when they were hoping to. Nalani, Pono, Sean, and John shared that they experienced challenges related to social issues while in an HSE program. Pono said, “It has been really challenging for me...being around people.”

*Poor School Attitude* was experienced by Sean, Kapena and Nalani. Stephanie shared that after she stopped attending high school, she had no desire to go back. She said, “I did not really bother with wanting to go back. I am just like, I do not really need school. I can just get a job.” Kapena, Sean, and Kathy also shared that they stopped caring about high school. Part of their attitude about school coincided with drug use.

Their attitude about school was also connected with them falling behind. Kapena shared, “I am failing all my stuff, I am getting all these failing grades and it starts to make me feel bad about myself.” He also said, “My grades would just drop, and I would walk into class and just sit down. They would pass the worksheet...I would just sit down literally the whole class and do nothing.” Nalani shared that she was frustrated with her HSE program and developed a poor attitude about school. She experienced a set back which resulted in a delay in reaching her long-term goal. As a result, she had a poor attitude about being in an HSE program. She said, “I realized that [I would not] go to college when I planned. I was furious that day. After that, I just felt kind of out of it...I distanced [myself] from learning.” She eventually worked through her poor attitude and was able to continue her work.

**HSE is Positive.** For many participants, their motivation was to break the cycle. Drop out and maladaptive lifestyles were a pattern in their family and they were motivated to break that pattern. Participants shared about how being enrolled in an HSE program was a way to overcome past barriers and challenges. Obtaining an HSE was seen as a positive endeavor for participants which included having a *Positive HSE Experience, Hope and Optimism, Motivation, and Improved Self-Efficacy*.

Majority of participants shared that they had a *Positive HSE Experience*. Six of the seven participants shared that being in an HSE program was a good environment and a positive opportunity. Nalani said, “I felt really happy because I was like super good in the [HSE Program]. I went to school every single day...I did all my work...I would skip ahead.” When talking about working on her HSE Stephanie said, “I like doing this

program. It actually helped me [to figure] out what I want to do after.” She also said, “Now being in school, it made me think like, oh, since I have this, I can do more. You know? Not just get a job. That is when I looked into the medical field.” Sean shared that the HSE program was “supportive but challenging.” For the participants, earning their HSE was a way out and a start to something greater. Kapena shared that in an HSE program, he is not around the same influences as when he was in high school. He said, “...over here, I am not around that drugs and stuff. I do not have those influences.”

Stephanie also talked about the adult education environment as being positive because students are there for a reason and a purpose. She said, “We are all adults. In that class its like we are adults, so we are all mature...It is like an adult environment. They are not there just to have fun.” Kathy shared that being in an HSE program was a time for her to focus on herself. She said, “All I have to do is focus on me. I get to worry about me.” She also said that she has more confidence because she is doing well. She said, “I like it because I like taking notes, I like taking notes and passing my tests. It is a good feeling.” When asked if she has more confidence now, she agreed that she does. Stephanie shared a similar experience and being in an HSE program was a time for her to do something for herself. She also shared that earning her diploma would be a “weight off the shoulders.”

*Hope and Optimism* was used to describe the hope and optimism that participants had as a result of being in an HSE program. Sean shared that a diploma is “...like a way out because you will get your diploma and it will give you things that you need to be successful later.” For him, an equivalency diploma was a way to right many wrongs in his life. For Nalani, earning an HSE was a way out and a way to something better. She

talked about wanting to go to college and obtaining a good paying job. For Stephanie, earning her HSE was a way she could better provide for her family. She said, “I do not want my kids growing up how I used to.” She also said, “Now I can do something for myself because it would do good for them later on.” Kapena was hopeful about his future. He said, “My future means more right now.” Kathy shared that she looks forward to her future. She said, “I just think about the future. I think about how much fun I am going to have. I am just ready to live my life.”

*Motivation* is described as a reason for participants to earn their HSE. This was a common code across all participants. For participants, there were several motivating factors. One common motivation was to “break the cycle.” Sean, Nalani, and Kapena shared that they wanted to break the cycle of drop out because their parents, or someone in their family, dropped out of high school. Sean shared that he recognized he was going down the same path as others who were destructive. He wanted to break the cycle and make something of himself. He said, “[My father] did not graduate from high school, so I want to be able to graduate high school and do it differently.” Nalani said, “A lot of the adults in my family did not finish high school. They gave up a long time ago. It is kind of like I achieved something.” For her, if she could get her diploma and go to college then she could get a better job and that would mean breaking the cycle of dropout and the cycle of poverty in her family. When talking about this, she said, “If I can get a high school diploma then that means I can go to college. If I can go to college that means I can get a better job, and if I can get a better job, then I do not have to live in poverty. She recognized that “...most jobs now days you need an education.” For her, it was a

“stepping stone.” John shared that he wanted to turn his life around. He said, “I wanted to change my life...to kind of make my life better and be more productive.” For Kapena, he saw a need to change his life or things would get worse for him. He said, “Eventually, you are going to get caught or run into problems. I was already running into problems but it is like eventually you are [going to] run into bigger problems and bigger stuff is going to happen.” He had reached a place in his life that he was motivated to make a change. He said, “I just thought to myself I can not be doing this my whole life.” For him, turning 18 was a motivating factor. He said, “It makes me try harder because I feel like this is my last chance since I am 18.” Stephanie shared that being in an HSE class made her want to “start to get into what I would want to be.” For her, being enrolled in an HSE class was motivation to have a career. She also said that getting an education was a way to provide better for her family. She said, “I cannot have my kids go through [what I went through], so I was like, you know what? No. I have to do something.”

*Improved Self-Efficacy* was also experienced by participants as they progressed through their HSE program. Kathy shared that she was excited that she knew some of the material when she was expecting not to. She said, “I felt good. Excited I knew some stuff.” John shared that being in an HSE program improved his confidence in his abilities. He said, “I am really confident in myself this time because I am really trying to push myself to improve myself in my life and to make changes,” “...that is a big accomplishment because I could never do that in high school.” Nalani shared that she felt good knowing that she was successful and completed her work. She said, “I was super happy. You know? I worked super hard.”

**External Protective Factors.** Participants shared about external protective factors that helped them to overcome hardship or promoted resilience. These external factors were outside, or environmental, and reduced the likelihood of continued demonstration of maladaptive behaviors. *Positive Social Interactions*, *Previous Positive School Experiences*, and *Positive Support* were identified external protective factors.

*Positive Social Interactions* was shared by five of the seven participants.

Stephanie said that while she did not socialize much and was not very social, she did have a close group of friends that she felt really connected to. She said, “I had a group of friends that I would hang out with, still till this day.” Kathy shared that she did not have many friends in elementary because she was hardly at school. However, when it came to intermediate and she was put in foster care, she attended school regular and was able to make positive connections with peers. She said, “I have to go to school, so then my friendships got closer and I actually had friends.” Stephanie shared that she “liked being around other kids.” She also said, “I still have the same friends from 6<sup>th</sup> grade.” Sean talked about his personal relationships and mentioned that they helped him to grow. When talking about his friendships, he said, “I have gone through a lot of things, and they helped me to grow.”

*Previous Positive School Experiences* was also shared by participants. These experiences were prior to their early departure from high school. Despite eventually having negative school experiences, participants shared that they enjoyed school and had positive school experiences early on. Stephanie said that she enjoyed going to school in elementary. She said, “when I was little, I did like school.” Kapena also shared that he

enjoyed school and had positive experiences. He said, “I always liked school, honestly, I always liked school. I looked forward to going to school.” Pono also said, “I used to like going to school.” Kathy shared that when she was in intermediate, she had positive school experiences. She said, “I hung out with the [smart] people and did homework and I did not really get into trouble.” However for Kathy, despite having positive school experience, she reports missing a lot of school. Stephanie said that she “had fun in school” and that she “would do it again if she could.” For participants, these positive school experiences supported their interest in earning an HSE diploma.

Sports were also part of participants’ positive school experiences. However, for all three participants, when they started to backslide and do poorly in school, it resulted in a loss of this protective factor. Pono said that, “I just stopped playing for a while. I got into drugs. I told myself, I have to stop. I have to get back into football.” Kapena also shared that football was a way for him to get his life on track. He said, “I [could] get my life back on track. I feel like football was [that motivator] for me,” “[but] I could not play, because my schooling. My choices [prevented me].” He also shared that when he began to spiral downward, he lost the option to play sports. This loss of his protective factor resulted in further academic decline and poor choices.

*Positive Support* was experienced by participants and this support helped participants to overcome some of their barriers. John, Stephanie, and Kathy talked about having family as support. John said that his parents helped and supported him. When talking about the support of his parents, he said, “Their support helps me.” Stephanie talked about her mom, boyfriend, and her siblings. When talking about her boyfriend and

father of her children, she said, "...my baby daddy, he is really understanding. He listens to everything I tell him, like he knows everything about me." Kathy talked about her grandmother and her aunty. Kathy said, "I always felt supported by my grandma and my aunty. Every time I would break down, I would talk to them. I would vent to them, and my grandma, she would sometimes go after my mom." Kapena shared that a friend's mother supported him. He said, "My friend's mom supported me all the way, she knew what I was going through." Pono talked about his girlfriend and her family as being a support for him. He said, "She helped me through everything, my girlfriend," "...she and her family and everyone just kind of helped me."

**Internal Protective Factors.** Participants talked about internal protective factors that helped them to overcome barriers and challenges. These internal protective factors refer to factors within each participant. They are personal attributes and characteristics. These protective factors included *Resilience*, a *Positive Mindset Shift*, *Positive Coping Skills*, and *Spirituality*.

*Resilience* was common amongst all participants. John said, "I am doing better each and every day instead of going backward...I am seeing a lot of improvements in myself...I am accomplishing so much and I am glad I forced myself here." Kathy shared, "I think I was broken before, like, I feel like I was a stray dog in need of help, and when I went into foster care, that is when I came happy...I think day by day, I am turning pages." Stephanie was able to overcome her anxiety, which, for her, was debilitating. She said, "It comes still, but I know how to control it more than before." Stephanie talked about having a rough life, but moving past it. She said, "Yeah, it is been a rough



life, but everybody goes through a lot of things in life.” Pono shared that being in an HSE program is challenging, but that he could work through it. He said, “It is been challenging, but I know I can pull through this.” Nalani talked about overcoming her challenges and anxiety. She said, “It is up to you if you want this to happen, than you need to do this. It is your responsibility to make it happen for you.”

*Positive Mindset Shift* included a change in perspective. For participants, the bad experiences that they went through were turned into something positive. While they shared that at first, their barriers and challenges were hard and not something they were proud of, those experiences made them who they were. Kapena and Sean both shared that they were glad the hardships and bad experiences happened because it helped them to realize what they were capable of. Kapena said, that one day he realized that the life of trouble was not for him. He said, “I just realized one day it was not for me, doing these drugs. It was a lesson learned. It could have been worse.” He also shared that he was glad he made the choices he did because it helped him to come to a realization that he needed to change for the better. He said, “I just feel like that was a lesson learned. I honestly feel like, I am glad it happened then...it just opened my eyes more.” He also said, “It is all in your mind. If you want to change, you can change. If you do not want to change, you are not going to change.” Sean said,

I went through a hard time, like something that is a really major impact. It really brings you down...It takes a while to recover, but then you do recover. I realized that...I just feel more knowledgeable and more mature about it because of the way I did things and the way things happened to me.

John shared that his life changed. He said, “My life really changed around and I started buckling down and started looking toward the future instead of looking toward the past.” Stephanie shared that she realized that she needed a job and a diploma to have a future. She said, “You need an education.”

*Positive Coping Skills* were talked about by four of the seven participants.

Kapena shared that listening to music, body boarding, and playing sports were positive coping strategies for him. Kathy shared that to cope with her challenges she would go for a walk or listen to music. She said, “[I will] go walk. I like to walk [or] I would listen to music.” She also said that sometimes she needs to “cry everything out and then bounce back.” Stephanie shared that she was able to control and cope with her anxiety. She said, “I just try to relax and breath,” “I figured out a way to work through it. Like breathing is the main thing and drinking water.”

*Spirituality* was shared by four participants. Stephanie shared that when she begins feeling anxiety and like she is having a panic attack, she prays. She said, “most times, I just pray. I just keep praying... Yeah, praying actually really did help me.” Pono also shared that his faith was a part of his life. He said, “I pray every night before I go to sleep and every morning.” Kathy shared that she goes to church and prays in order to overcome some of her challenges. She said, “I go to church and they ask what to pray for, and I [want to work] on my relationship with my mom.”

**Counseling is Positive.** Participants shared that they felt counseling was positive and beneficial. The codes for this theme are *Beneficial Counseling* and *Counseling Utilized*. Only three of the seven participants shared that they utilized counseling

services in their lives. Two of these participants highly recommended counseling. The other participant shared that counseling was beneficial, however, she did not like having to talk about her feelings. She did not have a consistent counselor and saw several different counselors. Having to retell her story to a different counselor was not something she preferred.

*Beneficial Counseling* was used to code instances in which participants shared that they thought and felt that counseling was beneficial. All seven participants shared that they felt counseling could help them and others like them. Kathy shared that she learned coping skills through counseling. She said, “I learned in therapy, they said to look in the mirror and talk to yourself and give positive things and that is what I do...I wash my face and look in the mirror and like, I am going to be okay.” Kathy also shared that her school counselor was the one who reported her abuse. Kathy was grateful that her counselor reported it. Stephanie shared that seeing a counselor was beneficial. When sharing about her counselor, she said, “She was really good. I liked her. She actually helped me out a lot. She just listened to everything I would say. I was like, okay, this is better than I thought.” She also said, “She was really good. I liked her. She actually helped me out a lot. She just listened to everything I would say. I was like, okay, this is better than I thought.” John shared that he had a counselor in school and saw an outside counselor (private provider). When talking about his outside counselor, he said, “I wished I stayed with that counselor because that counselor actually helped me out a lot.” Kapena shared that he did not like to open up about his experiences, particularly the hardships and challenges related to his biological and foster family. However, he did say

that it is good to get it out. He said, “I do not like talking about that, but it is good to get it out.” Kathy also shared that she did not like retelling her story. Nalani said that she thought all schools should have counselors. She said, “All should schools should have [counselors]; high schools, adult schools and colleges. I think that everybody should have that just because a lot of students just stress out, the entire time for school.” Pono also shared that it would have been good to see a counselor. He said, “ I think [before], it would have been good, if I had [a counselor].”

*Counseling Utilized* was used to code instances in which participants shared they utilized counseling services. Only three participants shared that they utilized counseling. However, all participants said that they thought counseling is beneficial and could have helped. Kathy shared about utilizing counseling services. She said she “had therapy for PTSD.” For her, it was hit and miss. She said, “I just felt like, I am slowly getting over it. So I could talk to [counselors] and about [my mom] and I would not cry, so I feel like I am slowing progressing.” On the other hand, Kathy shared that she was tired of talking about the same things and it was particularly frustrating to tell her story over and over to new counselors. She said, “I do not like talking about the same stuff and then crying. I just feel tired, you know.” Stephanie shared that she utilized counseling (private provider) to help her manage her anxiety and panic attacks. She said, “They gave me this [counselor]...I have been seeing her for almost two years,” “...she was really good. I really liked her, she actually helped me out a lot.” Stephanie said that she was able to get off anxiety medication because of the progress she made in counseling. She said, “I did not have to take medication, and I felt better.” John shared that he wished he still saw his

private counselor. He said, “The outside counselor...thinking back, I kind of wish I stayed with that counselor because that counselor actually helped me out a lot.”

**Counseling Limitations.** While participants talked about the benefits of counseling, the limitations of counseling were also mentioned. Several participants shared that they did not utilize counseling, felt that school counselors are limited, and that there needs to be a good match in the therapeutic relationships. The codes *Counseling Unutilized*, *Counselor Action (School)*, and *Counselor Match* were used for different counseling limitations.

*Counseling Unutilized* was a common theme amongst majority of participants. Four participants shared that they did not utilize counseling services. Kapena said, “I would not open up to anybody. [They] did not really know what I was going through or my story. I did not want anybody to feel sorry for me.” Kapena shared that he did somewhat open up to counselors in school. He said, “Outside, I really would not open up to anybody...sometimes I would open up to them in school. Not really that much though. [They] did not need to know what I was going through or my story and stuff.” Kapena went on to share that he did not want others feeling sorry for him because he was a “foster kid.” He said, “I did not want [anybody] to feel sorry for me because I had been [the] through foster [system] when I was a kid.” He also dreaded having to open up to people about his story and experiences. Kapnea said, “I do not think about it until someone asks, then I really have to. I am like, oh no, here we go again. I have to explain it again.” Pono also shared that he did not utilize counseling services. When asked if he

saw a counselor, he said, “No. Not really.” Sean also shared that he did not see a counselor and that he did not want to burden others with his problems.

*Counselor Action (School)* was also talked about as a limitation. This code was used for instances in which participants specifically mentioned school counseling. John shared that school counselors are limited and are not always available. He said, “...school counselors, yes, but I mean, it is better to get a counselor from outside too because you could see them every week.” Kathy shared that she wished the school counselors in her life paid closer attention. She said, “They should pay close attention to the kids more than academics...they do not really pay attention to how the student really feels and like what they are going through,” “A lot of people can hide their depression really good.” She shared that she only saw her high school counselors for “school stuff.” However, her counselor in intermediate reported the child abuse and as a result, she got the help that she needed. Looking back, Kathy shared that she wished her earlier counselors intervened sooner. She also shared that, “I wish I had said something way before,” “I was scared.” Kathy said that she did not remember her elementary school counselors, in part because she moved around a lot so they did not have time to investigate the abuse. However, her intermediate counselor tried to talk to her but she did not open up so the counselor did not report the abuse initially. She said:

The teachers would tell her that I would have marks on me so [they would] send me to the counselor’s office and she would ask about the marks and I would be like, the cat scratched me, or I got hit with the racket or something, and I would cry so, like, she knew it was not true, but then I would just stick to my story.

Kapena also shared that he wished the counselors paid more attention to him. He said,

“I never [got] pulled in. They just, turned their whole mindset, like, he is a pothead already. Like instead of pulling me in and [looking] at my grades, “You had A’s and then all of a sudden you have Ds and F’s, what’s going on?” They never did do that.”

Kapena also said that if his counselors pulled him in at the right time it would have helped him. He said, “...at the right time, it probably would have helped. I hoped, I wish they did,” “I feel like they could have talked to me at least.” Stephanie also shared that she did not feel school counselors were able to help her with her anxiety. She said, “...school counselors, I do not think they would be able to help with that kind of stuff because they are school counselors.” Stephanie said that school counselors could help in “...an emergency...they would be able to help because they are there.” However, she shared that she felt they did not have the specialized training to help her. She also said, “I do not think school is the right place for an actual counselor,” “they have so many [students], I just do not feel like it is just right, it is just so many kids.”

*Counselor Match* was a code that frequently came up. Five of the participants shared that they felt that having a good counselor to client match was very important. Stephanie shared, “You have to feel real comfortable with the person. You have to feel comfortable in order to make it happen. If you feel uncomfortable, then it is just not going to happen.” John talked about trust and the importance of trust in the therapeutic relationship. He said, “I have that trust in them, but if they lose that trust, I won’t tell them personal stuff or my problems,” “I know I can trust them because they actually

listen to what I say and they really care.” Stephanie shared that her counselor passed away and she needed to find a new counselor. She was worried that a new counselor would not be a good fit. She said, “It is hard for me to just tell somebody, anybody my problems.” Nalani shared that she needs to be comfortable talking with a counselor. She said, “I need to really be able to trust the person.”

### **General Narrative**

All participants experienced emotional and psychological challenges in addition to a multitude of barriers. The emotional challenges included having difficult emotions, poor coping skills, and feeling alone and regret. These emotional challenges contributed to their overall mental state. Psychological challenges participants faced included having difficult thoughts, a negative mindset, belief that they fell from grace, low self-efficacy and belief that they had no options. These psychological challenges influenced their beliefs about themselves, their situation and their choices. Participants faced additional barriers as a result of external adversity which were imposed on participants. These barriers included forced adulthood, major life events, poverty and a lack of stability, and interpersonal struggles such as home life challenges, a lack of support, and social challenges. These external barriers were often out of their control and had compounding influence on the lives of participants.

Much of the emotional and psychological challenges faced were experienced prior to participants’ early departure from high school and prior to their enrollment in an HSE program. For many participants, the emotional and psychological challenges, as well as barriers regarding interpersonal struggles and external adversity, resulted in maladaptive



behaviors and school struggles. For example, participants faced with home life challenges engaged in drug use and other maladaptive behaviors as a means to cope with their home life. Other participants were thrust into adult responsibility and functioned in survival mode. In both examples, attending school was not a priority. Participants detached from school, resulting in academic failure leading to eventual early departure from high school.

Eventually, participants found themselves without any options and faced a moment where they needed to choose to continue going down a path of continued struggle or attempt to rewrite their story. At that point, participants enrolled in adult remedial education to earn their HSE credential. Arriving at this point was a positive experience for participants as they acknowledged their previous failures and set out to improve their life circumstances to overcome their challenges. Looking back at their experiences, participants recognized that their challenges and barriers brought them to the place they were at the moment. That place was one in which they made the conscious choice to change their lives. While participants expressed sadness, regret, frustration and other difficult emotions and thoughts regarding their prior experiences, participants also interpreted these experiences as part of who they are. In a sense, they could look back with a semblance of pride that they overcame adversity and they found solace in their strength and resilience.

Overall, being in an HSE program was a positive experience for participants and an eventual boost to their self-efficacy, and their thoughts and feelings about themselves and their situation. Enrollment in an HSE program was a source of hope and optimism

and participants were motivated. It was symbolic of their path and their resilience. This was somewhat surprising to me. My fore-conception (preconceived knowledge) about adult remedial learners was that struggles and challenges faced prior to dropping out of high school would persist into enrollment in an HSE program. However, this was not completely the case. Participants continued to experience struggles and barriers, however, not to the degree in which they faced leading up to their early departure from high school and prior to their enrollment in an HSE program. In order for participants to enroll in an HSE program, they had to overcome the barriers and challenges that led to their early departure from high school. Given their adversity, it was a success just to arrive at a place in which they could be a part of an adult remedial education. However, reaching this point did not mean guaranteed success. Participants continued to face adversity, however despite that, they demonstrated resilience. Participants recognized that it was up to them to make a change in their lives and to achieve the accomplishment of earning an HSE credential. Participants also recognized both internal and external protective factors which contributed to their positive growth and development. These protective factors included positive supports, positive social interactions, positive coping skills, spirituality, a positive mindset shift, resilience, and having once had positive experiences with school.

Participation in counseling was also recognized as a positive support. Both participants who had utilized counseling at some point in their lives and participants that had never utilized counseling recognized the benefits of seeing a counselor. Participants thought that having someone to talk to and provide guidance would have been beneficial

prior to them dropping out of high school. Participants shared that they wished their school counselors recognized their challenges and did more to reach out to them.

However, they also recognized the limitations school counselors have, mainly the school setting, counselor training, and the amount of students school counselors have to see. In general, access to a counselor in school settings, including adult remedial education, was not familiar to participants. Participants that saw a counselor while in adult remedial education were seeing a private provider. Participants also shared that they thought that the counselor and client relationship needed to be the right fit. Having a good match and a positive, safe, and comfortable working relationship were identified as critical needs in order for counseling to work and for participants to continue seeing a counselor.

### **General Description**

Prior to dropping out of high school, noncompleters likely face challenges and barriers which contribute to their drop out. They experience emotional and psychological challenges as part of their lived experience, which are a part of their being in the world. Prior to dropping out, these challenges are interpreted as experiences that prevent them from a path that leads to graduating from high school through traditional means. Much of their challenges and barriers are external and as a result of factors that are out of their control (home life, choices and actions of their guardians, and their economic status). What noncompleters do have control over is choice. However, many noncompleters engage in maladaptive behaviors and make poor decisions. In hindsight, they recognize these choices and behaviors as harmful. However, in the moment of decision-making,

noncompleters feel detached from their choices which are often made to numb themselves and also to escape from their reality, challenges, and barriers they experience.

Adult remedial learners are noncompleters who have made the decision to earn their HSE credential and enroll in an HSE program. Noncompleters who become adult remedial learners have reached a point in which they realize that they want to make a positive change in their lives, and earning an HSE credential is part of that positive change. This change is a conscious decision and for many noncompleters it is arrived upon as a result of a history of struggle and challenges as well as poor decisions and maladaptive behaviors. Adult remedial learners come to understand their existence, and they acknowledge and come to terms with their past decisions. Adult remedial learners do not want to continue to struggle or face challenges. Instead, they arrive upon the decision to return to school to earn an HSE credential in an effort to change their lives and to strive to become something better and greater. Interestingly, despite challenges and barriers, some severe, adult remedial learners are able to look back at their prior challenge and barriers as part of their lived experience and a part of who they are. Their understanding of the world does not come from the facts they know about the world. Instead, their understanding comes from knowing who they are and how they live in the world (Wrathall, 2005). Their understanding and existence is how they make meaning of their being in the world. Adult remedial learners understand their being in the world through their challenges and barriers which are part of their lived experiences. Their lived experiences led them to the present and are seen as part of their strength. While others might see these experiences as a weakness and debilitating, for adult remedial

learners, their struggles and barriers are seen as experiences that make them who they are and helps to give them strength to defeat the odds. Adult remedial learners identify that better positive supports and life circumstances could have helped them to move forward in their times of need or helped them to avoid hard circumstances. However, looking to the future, they recognize that supports and proactive factors help them to move forward. Similarly, adult remedial learners recognize that counseling could help them and could prevent some of the challenges they face. Given the right match and a positive trusting working relationship, counseling is seen as beneficial to adult remedial learners. However, adult remedial learners recognize the limitations of counseling, particularly in school settings, and they acknowledge that there has to be a right fit in order for counseling to work.

### **Summary**

This chapter summarized the steps taken to for data collection and analysis. Findings from interviews were presented, and codes and themes were discussed with examples given to support the analysis. Overall, all the participants experienced some sort of external adversity and hardship which made it difficult for them to reach academic success in high school. Prior to dropping out, participants struggled with emotional and psychological challenges. Participants also struggled internally as well as externally, and those struggles spilt over into their academic progress. As a result, they departed from school early with out earning their high school diploma. For these noncompleters, there was a period of struggling and feeling like they did not have any options. When they enrolled in HSE classes, participants struggled initially and experienced a period of

uncertainty and low academic self-efficacy. They engaged in maladaptive behaviors which took away from their academic progress. However, after experiencing success and finding that adult remedial education was safe and supportive, participants were able to overcome and demonstrate resilience. Participants had varying degrees of support systems and protective factors. For some, these support systems helped them to overcome barriers and challenges. However, for some, the lack of support contributed to their struggles. Counseling services were recognized as something that could have helped prior to their early departure from high school. Majority of participants shared that counseling was seen as something beneficial regardless of whether participants had prior experience with counseling. However, these services were more often not utilized by participants. Additionally, while counseling was seen as something that could be beneficial in adult remedial education, participants recognized that the school setting poses challenges for counselors and counseling services.

## Chapter 5: Discussion, Conclusions, and Recommendations

### Introduction

The purpose of this qualitative phenomenological study was to explore experiences with emotional and psychological challenges among adult remedial learners prior to dropping out and through enrollment in an HSE program. Through analysis of the data, 11 themes emerged: (a) External Adversity, (b) Interpersonal Struggle, (c) Emotional Struggle, (d) Psychological Struggle, (e) Maladaptive Behaviors, (f) School Struggles, (g) HSE is Positive, (h) External Protective Factors, (i) Internal Protective Factors, (j) Counseling is Positive, and (k) Counseling Limitations. In this chapter, I provide an interpretation of the findings, discuss the limitations of the study, offer recommendations, and describe implications of the study.

### Interpretation of the Findings

Participants in this study experienced multiple barriers to their success. Doll et al. (2013) shared that participants drop out of high school for three main reasons: *falling out*, being *pulled out*, or being *pushed out*. This was true for the participants in this study. The barriers all participants experienced resulted in participants falling behind in their academic work and eventually dropping out of high school. Additionally, for several participants, external circumstances resulted in them being pulled out of school while other participants were pushed out due to barriers surrounding disciplinary action.

All participants engaged in maladaptive behaviors. These behaviors (trouble with the law, drugs, and negative coping skills) were key barriers to their success. This is consistent with the work of Messacar and Oreonpoulos (2013), who shared that high

school noncompleters are more likely to use illicit drugs than their peers who graduate. Additionally, Esch et al. (2014) reported that substance use (particularly cannabis) was a strong predictor of high school dropout, and Fergusson et al. (2015) stated that noncompleters are known to have higher rates of substance abuse. According to Esch et al., drug use prior to the age of 16 resulted in a significant risk for high school dropout. In the present study, five of the seven participants shared that they used drugs, and all participants who used drugs reported doing so at the age of 16 or prior. Participants' drug use contributed to academic decline, poor attitudes about school, and negative mindset shift.

Participants also faced barriers as a result of external adversity (forced adulthood, major life events, poverty, lack of stability, and having no options). Prior literature identified poverty as a major concern for noncompleters. Khatiwada, Sum, and Palma (2014) and Messacar and Oreonpoulos (2013) shared that noncompleters face additional hardship after they drop out because they do not have the necessary credential (a high school diploma) to get a job, attend college, or enter work-training programs. Additionally, Fergusson et al. (2015) also noted that noncompleters have higher rates of economic hardship. Participants' experiences in this study were consistent with this finding. All participants recognized that they needed a diploma, and it was a prevailing thought that if they did not earn a diploma, they would not have much of a chance for success. For participants, coming to this realization was part of coming to terms with their reality. For all participants, living in poverty was also part of their reality. Four participants reported experiencing poverty while growing up and all were in poverty



while enrolled in an equivalency program. A few participants needed to work while attending school so that they could provide for their family, and this added responsibility was a cause of stress for them. The participants who were not as concerned about their financial situation had supports that provided for them or did not have a family to provide for.

Participants also experienced school struggles (academic problems and a poor attitude about school) and interpersonal struggles (home life challenges, a lack of support, and social challenges). Struggles related to their home life and a lack of support is consistent with previous research. Fergusson et al. (2015) and Hynes (2014) shared that high school noncompleters have higher rates of exposure to trauma and unsafe home environments than their peers who graduate from high school. The adult remedial learners who participated in this study experienced home life challenges related to trauma and unsafe home environments. They also experienced emotional and psychological challenges prior to dropping out and, to a lesser degree, throughout their enrollment in an HSE program.

Emotional challenges experienced by participants included having difficult emotions, possessing poor coping skills, feeling alone, and feeling regret. This is consistent with Meek et al. (2017) who shared that concerns among adult remedial learners in HSE programs include difficult emotions, such as anxiety, depression, and anger. The female participants expressed experiencing anxiety that was debilitating. This somewhat aligns with information presented by Hjorth et al. (2016), who found that females with anxiety and depression are at increased risk of dropping out. Esch et al.

(2014) also shared that anxiety disorders are significantly related to high school dropout among females. Interestingly, in their systematic review, Esch et al. (2014) shared that disorders related to anxiety developed several years after dropout, possibly indicating that challenges related to dropout, such as limited opportunity, contribute to an increase in anxiety, frustration, and mood disorders. In this study, this was consistent with two of the three female participants. Both experienced increased anxiety years after dropping out of high school. For one female participant, mounting pressure to reach unmet goals and feeling that she should have already received her HSE and achieved her goals resulted in increased anxiety and frustration.

In contrast to the female participants, several male participants shared experiences related to anger. Esch et al. (2014) shared that external behaviors related to aggression and agitations were found to be more commonly associated with males. In this study, three of the four male participants expressed anger and aggression. For two of these participants, their angry outburst resulted in trouble with the law or physical altercations. For them, their externalized anger got in the way of the success and academic progress.

Psychological challenges were also prevalent among participants. This is consistent with Esch et al. (2014) who found that psychological challenges were connected with high school dropout. Additionally, Koch et al. (2012) and O'Neill and Thompson (2013) shared that noncompleters experience psychological barriers, including lower self-efficacy and self-confidence. This is consistent with the findings in this study. Psychological struggles uncovered in this study include low self-efficacy, difficult

thoughts, a negative mindset, a sense of falling from grace, and a belief of having no options.

Much of participants' challenges were experienced prior to their dropping out of high school. However, participants also experienced some of these challenges while enrolled in an HSE program. Meek et al. (2017) noted that concerns among adult remedial learners in HSE programs include anxiety, stress, and frustration. Anxiety, stress, anger, and frustration were expressed by all participants. However, the emotional and psychological challenges that participants experienced while enrolled in an HSE program were not as numerous or as severe as those they experienced prior to enrollment in an HSE program. While in an HSE program, participants experienced difficult emotions, low self-efficacy, and difficult thoughts. Ross-Gordon (2011) and Jameson and Fusco (2014) shared that adult learners often have lower self-confidence and self-concept. Participants in this study expressed initial reservations concerning their abilities and confidence and, at first, felt that they were not capable of meeting the academic requirements of an HSE.

Past negative experiences with school, increased emotional challenges, and poor attitudes about their abilities can make it difficult for noncompleters to succeed (Allen & Bradley, 2015; Gluck, 2011; O'Neill & Thomson, 2011). For some participants, their expectations of an HSE program was based on their past negative experiences with school. For example, a participant shared that prior to dropping out, she missed a lot of school; thus, she did not know how to do the assignments, and her former teachers and classmates were hard on her. As a result she had anxiety about her performance in an

HSE program and was fearful that she would be the lowest performing person in class.

Another participant had past negative experiences with school staff and other students so she was initially apprehensive about staff and classmates in her HSE program.

For participants, enrolling in an HSE program was a ticket out of their challenging life situations. It was a way to overcome all of the hardship and challenges that they experienced and a way for them to put the past behind them. Participants had to overcome hardships and challenges in order to enroll in adult remedial education. Thus, they had already overcome a degree of adversity when they enrolled in an HSE program. This information does not quite align with previous literature that suggests that adult remedial learners face increased stress and emotional and psychological challenges (Meek et al., 2017; O'Neill & Thomson, 2013). Participants shared that their prior negative experiences had been more severe prior to their enrollment in an HSE program and many had increased peace of mind as they progressed through their HSE program. This was in part because earning an HSE credential was a way to overcome their prior challenges and barriers. As a result, participants' experiences in an HSE program were positive. Participants experienced more hope and optimism, greater motivation, and improved self-efficacy through their enrollment in an HSE program. Despite being faced with barriers, participants were able to overcome adversity, and this was evidenced by their enrollment in an HSE program. In other words, enrolling in an HSE program was a positive experience for participants.

Participants shared about feeling supported (or not) through their journey, and some had supports and protective factors to help them overcome their challenges. For

some participants, counseling was utilized as a means to overcome barriers. However, not all of the participants experienced counseling. Only three of the seven participants engaged in counseling; however, all participants felt that counseling was (for those who had counseling) or would have been beneficial. The participants who did not engage in counseling shared that they did not feel comfortable opening up to someone. Overall, they did not feel comfortable with seeing a counselor. This is consistent with the review of the literature. Mangan (2015) stated that many adult remedial learners do not feel comfortable seeking support from a counselor. Participants also shared that they did not feel that others needed to know what they were going through, and did not want others to feel sorry for them.

Participants also felt and believed that counseling has limitations, particularly in school settings. This is consistent with prior information that identifies that barriers to counseling in school settings include counselor professional identity, counselor-to-student ratio, and a need for more counselor training (Bettinger et al., 2013; Kaffenberger & O'Rourke-Trigiana, 2011; Miller & Rainey, 2008; Owens et al., 2009). According to participants, one of the limitations of counseling in a school setting is the number of students in a school. Participants shared that there were too many students for counselors to reach all students. This is consistent with prior literature and particularly true for adult remedial education settings. Meek et al. (2017) shared that there are less supports and services to address the mental health needs of adult remedial learners than are available to address the needs of traditional students. Participants also felt that there are so many

other students in a school setting that school counselors would not have the time to help them.

According to participants, counselor training is also a limitation. Participants shared that they did not feel that a school counselor would be able to help them with their concerns. Participants talked about wanting counselors to pay closer attention and to be more persistent in their efforts to reach out to students. This is somewhat consistent with prior literature. Hynes (2014) reported that high school noncompleters felt that policies prevented them from engaging in school services. Maynard et al. (2015) also shared that school counseling interventions mostly address academic and educational needs of student and not their mental health needs. Participants echoed this and identified that school counselors are often not able to reach students.

In an adult remedial education setting, none of the participants had experiences with counselors despite identifying that counseling in this setting could be beneficial. This information was consistent with information obtained from the literature review; no information regarding adult remedial learners' experiences with counseling in an HSE setting was uncovered. It is possible that no information was uncovered in part because adult remedial learners do not commonly see a counselor in an HSE setting. A limited number of participants did experience counseling while in adult remedial education but did so through a private provider. However, the majority of participants did not seek counseling through a mental health care provider. This finding was consistent with prior literature. Meek et al. (2015) shared that noncompleters are not likely to seek counseling services from a private provider.

Overall, participants had mixed feelings regarding counseling in a school setting. This could have been due in part to the fact that participants did not have consistent and regular access to a counselor while in any school setting (K-12 or adult remedial education) and therefore did not have prior experiences on which to base their beliefs. This in itself, is a concern, and is a possible indicator that noncompleters may not receive the services that they need at the time that they need them. Regardless of whether or not participants experienced counseling, they saw counseling as beneficial and expressed the importance of having the right fit as well as being able to have trust and have a positive working relationship with their counselor.

### **Analysis Through Hermeneutic Phenomenology**

From the hermeneutic perspective, how an individual interprets the world is how they exist in the world (Wrathall, 2006), and they are a result of their experiences and the meaning they make of their experiences (Jones et al., 2012). For participants in this study, their challenges and barriers were how they made sense of identity. They identified their struggles as what had brought them to where they were. In other words, their challenges and struggles were a part of who they were, their existence, and their reality. Participants only knew the experiences that they had, and despite how difficult those experiences were, these experiences became part of their identity. While these struggles were very difficult and disruptive to their development, they were viewed as a part of them and what made them stronger. Their struggles were a part of their journey, and this journey ultimately led them to enrollment in an HSE program with the decision to better their lives.

Much of participants' early experiences included living in situations and circumstances not of their making and out of their control. These experiences were simply part of their reality and part of their lived experience. They did not view these experiences as something for which they should be pitied. These lived experiences shaped their interpretations of the world and the meaning that they gave to their lives. Participants perceived that without their struggles and challenges, they would not have had the chance to break the cycle and make positive changes. This desire for positive change resulted in a revision of their understanding of their experiences. Leading up to the peak of their challenges and barriers, participants were engulfed in their experiences, living moment to moment with minimal consideration of their existence as a whole. In many ways, they were just surviving. As such, consideration of their existence on a larger scale was not something that they were conscious of in the moment. Participants shared that through many of their most troubling and challenging circumstances, they did not feel fully present. Participants also shared that they made choices and engaged in behaviors in efforts to numb themselves and detach from their troubling reality. It was not till they made the conscious decision to turn their life around that they were fully able to embrace their experiences. Ultimately, participants recognized that without challenges and their choices, they would not have had the opportunity to build a better future.

Part of the future participant wanted for themselves included an HSE credential. Participants expressed having preconceived ideas regarding what enrolling in adult remedial education would be like. Initially, participants were unsure of themselves and had feelings of fear. However, after they enrolled in an HSE program, participants



revised their ideas, and their feelings and they became more optimistic. Receiving adult remedial education was no longer a daunting task that resulted in fear and anxiety. It became something that they could feel good about. Their identity and lived experience evolved to include being an adult remedial learner who was capable of earning an HSE credential.

### **Limitations of the Study**

There were several limitations to this study. First, the nature of qualitative research is such that it may not yield a large sample size that is representative of a larger population. The sample size for the current study was seven participants. Participants from this study were recruited from an adult education program in Hawaii. The culture and environment in Hawaii might have contributed to unique experiences for the participants. Thus, the information from this study may not generalize outside of this study. However, generalization is not the intent of qualitative research. Instead, the aim of qualitative research is to provide rich and in-depth information that may be transferred to other similar populations. The information gained from this study could add to the larger conversation surrounding high school noncompletion and adult remedial learners.

Another limitation was that participants were asked to share information about their experiences. It is possible that participants were not completely forthcoming about their experiences. However, during the interviews, none of the participants seemed uncomfortable or indicated that they did not want to share their experiences. All participants openly shared information about their experiences, and several mentioned that they wanted to be part of this study because they wanted to share their story. There

were little to no inconsistencies in participant stories. During the interviews and after analyzing the data and transcripts from the primary interviews, I identified any areas that were inconsistent. For example, I noted apparent contradictions, such as participants saying that they enjoyed school until a certain grade level but later sharing that they had always disliked school. In such situations, I followed up with the participants to clarify their experience. Additionally, member-checking interviews also offered an opportunity for participants to offer clarification.

### **Recommendations**

Recommendations for future research include expanding participant samples to include participants from other communities and geographic regions. Additional recommendations include following up with participants after they have completed or did not complete an HSE program as this may yield additional insight into the experiences of noncompleters. This study uncovered that participants felt that getting their HSE credential would open doors for them and it was a way for them to put their past behind them. Future research could explore the experiences of individuals who earned their HSE credential and examine whether those feelings of putting the past behind were still true. Future research could also include participants from different age brackets. The current study focused on emerging adults. This developmental stage comprises of unique development experiences. Adult noncompleters who have been out of school for longer may have different experiences. Therefore, future research could include adult remedial learners older than 25 years of age. Additionally, several of the participants completed their first round interview early into their enrollment in adult remedial education. They

may have been more optimistic at this point and may not have experienced the full scope of barriers in adult remedial education yet. Future studies might include interviews with participants at different points in their enrollment in adult remedial education (beginning, middle, and towards the end).

### **Recommendations for Professional Practice**

Based on the experiences shared by participants, it is recommended that schools recognize the emotional and psychological needs of students and work to promote counseling services. Participants shared that they wished a counselor intervened in their lives prior to their downward spiral. They also recommended that counselors pay closer attention and persistently reach out to students who are at-risk. Participants recognized that the school setting poses challenges for counselors and the number of students makes it difficult for counselors to connect to all students. With this, it is recommended that schools analyze the student to counselor ratio and work to develop a system that increases student access to counselors. Additionally, counselors in school settings are often not utilized as counselors (Dekruyf et al., 2013). It is recommended that school counselors be allowed to function in the capacity of a professional counselor. Participants also shared that they did not feel school counselors had the necessary training to help them with the severity of their concerns. Increasing counselor training and providing adequate counseling supervision could help to improve the efficacy of counselors in their school settings. Lastly, participants shared that they do not access counseling in adult remedial education settings. Improving access and awareness of counseling services in adult remedial education is recommended.

### **Implications for Positive Social Change**

While having a high school credential can open doors and lead to economic stability (Miller et al., 2014), only about one third of students graduate from high school (Messacar & Oreopoulos, 2013). Individuals without a high school diploma or equivalent are more likely to live in poverty and struggle with mental health concerns (Kaffenberger & O'Rourke-Trigiana, 2013; Santiago et al., 2013). Stark and Noel (2015) shared that noncompleters are typically from lower socioeconomic status and are already disadvantaged. Additionally, ethnic minorities, economically disadvantaged, and historically oppressed and disadvantaged communities are overrepresented in dropout rates (Miller et al., 2010; Rumberger, 2012). Thus, populations that have a history of oppression and adversity may face additional and continued adversity as a result of lacking necessary credentials. This was consistent with the current study. All participants in this study were ethnic minorities, and five of the seven participants were Native-Hawaiian and part of historically oppressed communities. All participants reported income that was below the poverty line. The data collected indicates that this population experienced hardship and challenges prior to their early departure from high school. Without a high school diploma, high school noncompleters are at a greater risk of to live in poverty and struggle with mental health issues (Kaffenberger & O'Rourke-Trigiana, 2013; Santiago et al., 2013).

Obtaining a high school diploma could help to open doors. Participants in this study acknowledged that this (increased opportunity) was the reason they enrolled in an HSE Program. However, returning to school to get their equivalency diploma was not an

easy task. Participants had to overcome significant adversity before enrolling in an HSE program and also continued to experience hardship throughout their enrollment.

Providing supports to noncompleters while they are working on their HSE diploma may help to improve outcomes. Supports, such as counseling, were seen as beneficial among participants. However, majority of participants did not see a counselor despite identifying that it would have been beneficial. Using this information, counselors, schools, and private providers might improve outreach and access to counseling for youth at-risk of dropping out and adults who did not complete high school.

Findings from this study can be used to develop better supports for students at-risk of dropping out of high school as well as high school noncompleters in adult remedial education. Working to help students with barriers and challenges prior to dropping out could also help to decrease the noncompletion rates. Likewise, working to help students enrolled in adult remedial education could help to improve HSE completion. With an HSE credential, noncompleters may have increased opportunity which, according to participants, would make a difference in their lives. Ultimately, for noncompleters, earning an HSE credential is more than earning a credential. Rather it is symbolic of their strength, ability to overcome adversity, and a way to a better life.

### **Conclusion**

The participants in this study shared about their experiences with emotional and psychological challenges prior to drop out and through enrollment in adult remedial education. Participants faced a number of challenges prior to dropping out of high school and after leaving high school. For participants, their challenges and barriers were seen as

part of their lived experience and a part of what made them who they were. While participants regretted their decisions and past, they realized that these experiences made them who they were and made them stronger. Even though their emotional and psychological challenges persisted into adult remedial education, in order to enroll in an HSE program, they had to already overcome significant adversity. This was a testament to their strength and resilience.

Participants recognized that counseling services was something that could have helped them. Looking back, participants acknowledged that if they had counseling support they might be on a different path. However, majority of participants did not access counseling services. Participants shared that limitations in school settings prevented them from accessing counseling and could prevent counseling from being effective. In addition to system challenges surrounding counseling in school settings, participants expressed apprehension toward seeing a counselor. In order for participants to want to and be open to seeing a counselor, they expressed needing to trust and feel comfortable with the counselor. The importance trust and a good match in the counseling relationship was an important part of participants' willingness and desire to utilize counseling services.

Overall, this study provided a snapshot of the experiences of noncompleters with emotional and psychological challenges. The information from this study can be used to better understand the experiences of noncompleters, the challenges and barriers they experience, and the role supports such as counseling can play. This study highlights the needs of noncompleters and the potential for improvements in counseling services for this

population. It is recommended that future research include other communities and geographic regions, additional age groups, and participants at vary stages of HSE enrollment. Information from this study and future related studies has the potential for positive social change and significance.

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## Appendix A: Participant Flyer



**VOLUNTEERS NEEDED  
FOR RESEARCH STUDY**

**ARE YOU:**  
**18 TO 25 YEARS OLD?**  
**TAKING CLASSES AT WCSA?**  
**WORKING ON YOUR HIGH SCHOOL EQUIVALENCY?**  
**IS ENGLISH YOUR 1ST LANGUAGE?**  
**HAVE YOU EXPERIENCED EMOTIONAL  
OR PSYCHOLOGICAL CHALLENGES?**  
**[CHALLENGES WITH YOUR FEELINGS, ATTITUDES, OR THOUGHTS?]**

**IF SO...**

**WOULD YOU LIKE TO SHARE  
ABOUT YOUR EXPERIENCES?**

**TO PARTICIPATE IN A CONFIDENTIAL  
WALDEN UNIVERSITY DISSERTATION STUDY**

**CONTACT**  
**CHRISTINE PARK**  
DOCTORAL STUDENT, WALDEN UNIVERSITY  
[REDACTED]

DR. KAT PEOPLES, DISSERTATION CHAIR [REDACTED]



Sp Adobe Spark

## Appendix B: Interview Questions

1. What were your prior school experiences like?
2. What are your current experiences with school?
3. What, if any, has been your experience with challenges related to your thoughts, attitudes, and feelings about school?
4. What, if any, differences have there been in your experiences with thoughts, attitudes, and feelings throughout school and your life (during high school, after dropping out, and not that you have returned to school)?
5. What, if any, barriers to your success have you experienced?
6. What has been your experience with overcoming your barriers?
7. What has your experience been with feeling supported?
8. What has been your experience with counseling?
9. What other experiences related to your mental health and well-being would you like to share?
10. Is there anything else you would like to share about your experiences with school, counseling, and barriers that we have not yet discussed?

## Appendix C: Demographic Survey

Name:

Contact phone number or preferred mode of contact:

Age:

Gender:

Ethnicity:

City of residence:

Last grade attended:

Income range:

\$9,524 and under

\$9,525-\$38,700

\$38,700-\$82,500

\$82,500-\$157,500

More than \$157,500

## Appendix D: Debriefing Handout

### Primary Interview Debrief

Title: A Phenomenological Study of High School Noncompleters with Emotional and Psychological Challenges

Thank you for being a part of this study. This study is done to gain a better understanding of students who are working on a high school diploma and experienced challenges. I hope that the info from this study will be used to help other students like you.

In this interview, you were asked some questions about your experiences. We talked about school, challenges, barriers, support, and counseling. Sharing might have caused you to feel upset, tired or stressed. You can call the Crisis Line of Hawaii 24/7 (808) 832-3100 if you feel continued distress. You can also call your regular doctor.

I will contact you in a week or so to schedule a short follow-up phone interview. I will ask a few other questions in the follow-up. You will also have time to share or correct anything that was missed.

I will put together a summary of the information at the end of the study. Let me know if you would like a copy of the summary sent to you.

If you decide you no longer want to participate let me know. If you know others who fit this study and might want to be a part of it feel free to share my information with them.

Thank you!

Please contact me with any questions or concerns.

Contact info:

